



NORFOLK COUNTY COUNCIL

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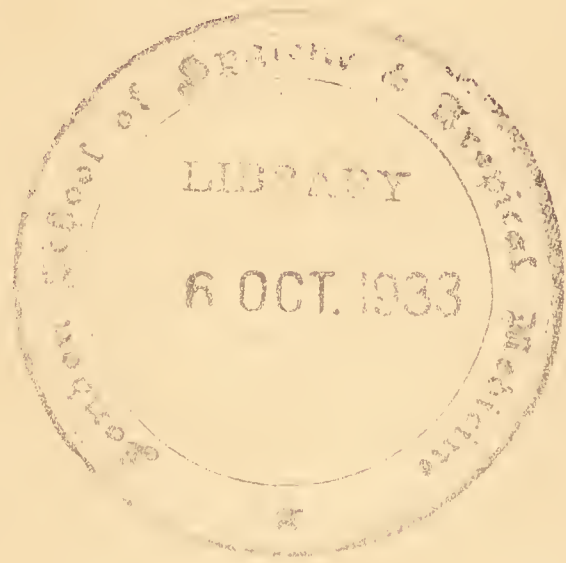
# ANNUAL REPORT

OF THE

County Medical Officer

FOR

1932





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## PREFACE.

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This is the twenty-sixth report of the series, and the fifth for which I have been directly responsible. There have been no notable advances made during the year with the exception that the County Council's Maternity and Child Welfare Centres had, by the end of the year, increased from seven to eleven.

The birth-rate has again fallen, but is satisfactory compared with that of England and Wales. On the other hand, the death-rate has risen, while that of England and Wales has fallen.

Attention is drawn to the remarks on page 13 concerning the absence of any material reduction in the death-rate of infants under one year of age, and the necessity for more District-Nurse-Midwives in the County.

The death-rate from cancer is still high. The Norfolk and Norwich Hospital, however, has recently been appointed one of the regional centres for radium therapy.

In connection with the treatment of tuberculosis, a new table is included on pages 48 to 51. Though its preparation is optional the information given is most valuable, as it shows the results of the scheme over a period of years. The figures also emphasize the importance of early diagnosis.

In December, officers of the Ministry of Health carried out a survey of the Public Health Services in the County, when the work of the department was inspected in detail.

In conclusion, I would like to thank the Chairmen, and members of the various Committees, for the considerable help they have given during the year. My thanks are also due to the staff for their loyal and hearty co-operation.

T. RUDDOCK-WEST.

Public Health Department,  
29, Thorpe Road,  
Norwich.

*August, 1933.*



# **PUBLIC HEALTH OFFICERS OF THE COUNTY COUNCIL.**

**WHOLE-TIME.**

## **County Medical Officer :**

T. RUDDOCK-WEST, M.D., B.S., D.P.H.

## **Deputy County Medical Officer :**

KENWAY T. WILLIAMS, M.D., M.R.C.S., L.R.C.P.

## **Clinical Tuberculosis Officer :**

W. B. CHRISTOPHERSON, M.R.C.S., L.R.C.P.

## **Assistant Clinical Tuberculosis Officers :**

D. MORRISON SMITH, M.B., Ch.B.

E. HOLMES WATKINS, B.A., B.M., B.Ch.

## **Assistant Medical Officers :**

\*N. CAMPBELL, M.B., C.M., D.P.H.

IRENE B. M. GREEN, M.B., B.S.

†O. C. DOBSON, M.D., B.S., B.Hy., D.P.H.

H. W. SEXTON, M.R.C.S., L.R.C.P.

CHRISTINA LAMONT, M.B., Ch.B., D.P.H.

\*Died May, 1932.

†Appointed Sept., 1932.

## **Dental Surgeons :**

A. J. CAIRNS, L.D.S.

SADIE S. HOW, L.D.S.

P. MILLICAN, L.D.S.

J. NIXON, L.D.S.

A. A. SUMPTER, L.D.S.

A. L. WHITAKER, L.D.S.

## **Inspector of Midwives and Superintendent Health Visitor :**

Miss M. A. FOWLER, M.B.E., S.R.N., Cert. C.M.B., H.V. Cert.

## **Assistant Inspector :**

Miss M. V. E. DAVEY, S.R.N., Cert. C.M.B., San. Insp. Cert.

## **Health Visitors :**

Miss W. A. BUXTON, S.R.N., Cert. C.M.B. (temporary).

Miss E. F. INGLE, S.R.N., Cert. C.M.B., H.V. Cert.

Miss D. PARKER, S.R.N., Cert. C.M.B.

Miss O. M. PARKER, S.R.N., Cert. C.M.B., H.V. Cert.

Miss C. MCGREGOR, S.R.N., Cert. C.M.B., H.V. Cert.

## **School Nurses :**

Miss F. B. BYGRAVE, Cert. Nurse.

Miss A. HOLDEN, S.R.N.

Miss F. B. JUGGINS, S.R.N.

Miss F. M. MANN, S.R.N., Cert. C.M.B.

Miss D. PERCIVAL, S.R.N.

Miss C. SHINGLETON, S.R.N.

Miss D. VICKERS, S.R.N.

Miss L. WALKER, S.R.N.

Miss A. WELLSTED, Cert. Nurse.

## **Home Teachers and Visitors under the Blind Persons Act :**

Miss A. E. PINNINGTON, Cert. College of Teachers of the Blind.

Miss M. D. RUSSELL, Cert. College of Teachers of the Blind.

## **Stanninghall Colony :**

*Matron :* Miss OFFORD, Cert. Nurse.

*Steward :* W. H. G. MILES.

## **Clerical Staff :**

*Chief Clerk :* C. J. HUBBARD.

*Senior Clerks :* G. E. MANTRIPP, A. R. PYE, H. E. WISEMAN, J. W. WOODCOCK.

*Clerks :* S. H. BISHOP, E. W. DURRANT, G. A. RABY, J. W. WEBB.

*Laboratory Assistant :* W. R. EMMS.

*Juniors :* A. J. ALLISON, A. ARMES, R. R. BALES, G. W. CURTIS, I. HOOK, W. R. HOWES, H. C. WEBB, D. WEEKS, P. WEEKS.

*Typists :* Miss B. DAVISON (*Senior*), Miss P. BECKWITH, Miss E. GRAVELING, Miss M. GREEN, Miss J. HAYHURST, Miss M. HUMPHREY, Miss B. LYNES, Miss E. WOODCOCK.

## PART-TIME.

### Orthopædic Surgeon :

M. W. BULMAN, M.D., M.S., F.R.C.S.

### Consultants under Puerperal Fever Scheme :

M. W. BULMAN, M.D., (Obstet.), M.S., F.R.C.S.  
A. CROOK, M.R.C.S., L.R.C.P.  
E. B. HINDE, M.B., B.Ch., F.R.C.S.E.  
C. E. S. JACKSON, M.B., B.S., F.R.C.S.  
C. NOON, O.B.E., F.R.C.S.

### Ophthalmic Specialists :

A. GREENE, M.D., F.R.C.S.I.  
G. MAXTED, M.D., F.R.C.S.  
S. T. PARKER, M.B., Ch.B., F.R.C.S.  
W. E. RUTLEDGE, L.R.C.S., L.R.C.P.  
W. WYLLYS, M.R.C.S., L.R.C.P.

### Medical Officers Venereal Disease Clinics :

S. H. LONG, M.D.  
T. J. WRIGHT, F.R.C.S.E. (*Assistant M.O.*) } Norwich.  
J. W. MCINTOSH, M.B., Ch.B., B.Sc. (P.H.), F.R.C.S.E., King's Lynn.  
G. P. C. CLARIDGE, M.B., B.S. (*Pathologist*).

### Assistant Bacteriologist :

F. T. ALPE, F.C.S.

### County Analyst :

W. LINCOLNE SUTTON, F.I.C.

### Inspectors under Food and Drugs Acts :

W. B. BARRY.

A. ROBINSON.

(*These Officers are also Inspectors of Weights and Measures*).

### District Medical Officers under the Poor Law Acts :

84 Medical Practitioners act as part-time Officers.

Medical Officers of Institutions : 15.

Public Vaccinators : 83.

Vaccination Officers : 28.

### Milk and Dairies Acts :

17 Veterinary Surgeons act as part-time Officers.

### Dental Surgeons :

20 act as part-time Officers under the Council's Dental Treatment Scheme for Expectant and Nursing Mothers.

### Health Visitors :

121 District Nurses act as part-time Health Visitors.

# Sanitary Districts.

<i>District.</i>	<i>Acreage.</i>	<i>Population Census, 1931.</i>	<i>Medical Officer of Health.</i>	<i>Sanitary Inspector.</i>
URBAN				
Cromer ...	1062	4176	Dr. R. C. M. Colvin-Smith	R. Croome**
Diss ...	3674	3421	„ H. M. Spiers	G. H. Jones
Downham Market ...	1003	2342	„ J. Gibb	*H. J. Diver
East Dereham	5313	5661	„ N. E. D. Cartledge	W. A. Norris
King's Lynn M.B. ...	3067	20583	„ J. W. McIntosh B.Sc. (P.H.)	J. W. Shaw
New Hunstanton	1064	3132	„ W. E. H. Bull	F. Wilkinson
Nth. Walsham	4256	4137	„ J. Shephard	W. Morris
Sheringham ...	928	4142	„ J. E. Linnell, D.P.H.	F. Hall Smith
Swaffham ...	7592	2783	„ R. O. Townend	C. Frobisher
Thetford M.B.	7096	4098	„ A. Oliver, D.P.H.	L. G. Howell
Walsoken ...	4907	4058	„ H. L. Groom	T. M. Kerridge
Wells-next-Sea	2670	2505	„ †G. Calthrop	F. Rodwell
RURAL				
Aylsham ...	69341	16212	„ B. B. Sapwell	H. W. T. Trotter
Blofield ...	45783	14415	„ J. D. McKelvie.	L. F. Beckwith
Depwade ...	79742	17690	„ F. N. H. Maidment	F. H. Bowden
Docking ...	87386	16284	„ B. G. Sumpter	A. B. Nowell
Downham ...	85411	15503	„ J. Gibb	S. C. Rigg
E. & W. Flegg	28991	10159	„ W. Royden	A. Coulter
Erpingham ...	62167	17018	„ J. E. Linnell, D.P.H.	G. L. Evatt
Forehoe ...	38528	12910	„ A. P. Agnew	A. W. Hobbs
Freebridge Lynn ...	75075	12352	„ O. L. Appleton	A. W. Plowright
Henstead ...	42380	10779	„ C. P. R. Gibson	J. B. Panks
King's Lynn...	1638	931	„ T. O. Hutton	R. Walker
Loddon and Clavering ...	60273	11822	„ E. N. P. Martland	C.W. Pritchard
Marshland ...	51091	14130	„ S. R. Lister	J. T. Dewhurst
Mitford and Launditch	102371	17107	„ N. E. D. Cartledge	B. E. Penny
St. Faith's ...	48933	14111	„ S. H. Long	H. S. Hawkins
Smallburgh ...	62627	13986	„ B. D. Z. Wright	A. L. Taunton
Swaffham ...	74556	6769	„ E. F. Rose	W. H. Edwards
Thetford ...	95873	9647	„ G. Cowan	A. O. Adcock
Walsingham...	79996	15815	„ W. H. Fisher	W. H. Moffat
Wayland ...	68774	13150	„ E. F. Rose	C. Whitworth

\*\*Resigned, September, 1932. Successor, H. Cleator Cowen.

†Resigned. Successor, Dr. E. W. Hicks, appointed Sept., 1932.

\*Commenced duty on 1st March, 1932—post had previously been vacant.



# STATISTICS AND SOCIAL CONDITIONS OF THE ADMINISTRATIVE COUNTY.

AREA	...	...	...	...	...	1,303,568 acres
POPULATION—CENSUS 1931	...	...	...	...	...	321,933
	Estimated by Registrar General mid 1932					321,760
NO. OF INHABITED HOUSES 1931	...	...	...	...	...	85,858
NO. OF FAMILIES OR SEPARATE OCCUPIERS, 1931	...	...	...	...	...	86,515
						</

The bracing air of Norfolk is in a large measure due to its extensive coast line on the East, North and North-West, extending to about 90 miles of its boundary. In the South the rivers Waveney, Thet, and Little Ouse separate the county from Suffolk, while in the West the Ouse and the Nene divide it from Cambridgeshire. The administrative county being largely rural in character is but sparsely populated, there being one person to every four acres according to the provisional figures for the 1931 census. The occupation of the inhabitants is mainly agricultural.

## VITAL STATISTICS.

### Births.

The live births registered during 1932 numbered 4917, of which 2574 were males and 2343 females.

The number of illegitimate live births reported is 12 more than last year, *viz.*, 299 comprising 158 males and 141 females.

179 stillbirths were registered, which give a rate of 36.40 per 1000 live births. This is an increase of 66 on the number registered in 1931.

The following table shows the number of live births registered and the birth rates during the past five years:—

Year.	URBAN.		RURAL.		ADM. COUNTY.		Rate for England & Wales.
	Net No.		Net No.		Net No.		
	Regstd.	Rate.	Regstd.	Rate.	Regstd.	Rate.	
1928 ...	967	15.75	4315	16.52	5282	16.37	16.7
1929 ...	841	13.61	4126	15.78	4967	15.36	16.3
1930 ...	873	14.32	4049	15.55	4922	15.32	16.3
1931 ...	863	14.29	4165	16.04	5028	15.71	15.8
1932 ...	897	14.79	4020	15.40	4917	15.28	15.3

### Deaths.

The number of deaths of civilians belonging to the county, after the allocation of transferable deaths, was 4166, giving a net death-rate of 12.95 per thousand of the civil population.

The following table gives a comparison with the number of deaths and death-rates during the past five years:—



Year.	URBAN.		RURAL.		ADM. COUNTY.		Rate for England & Wales.
	No. of Deaths.	Rate.	No. of Deaths.	Rate.	No. of Deaths.	Rate.	
1928 ...	787	12.85	3102	11.65	3889	12.07	11.7
1929 ...	903	14.61	3433	13.14	4336	13.42	13.4
1930 ...	668	10.96	3049	11.73	3717	11.58	11.4
1931 ...	770	12.75	3273	12.62	4043	12.65	12.3
1932 ...	818	13.48	3348	12.82	4166	12.95	12.0

The chief causes of death were as follows. Figures in brackets are those for 1931 :—

Heart Disease	...	...	...	819	(918)
Cancer	...	...	...	615	(515)
Other Circulatory Diseases	...	...	...	305	(301)
Senility	...	...	...	252	(233)
Cerebral Hæmorrhage	...	...	...	231	(231)
Pneumonia	...	...	...	195	(152)
Pulmonary Tuberculosis	...	...	...	168	(162)
Bronchitis	...	...	...	161	(195)
Congenital Debility, Premature Birth, Malformation, etc.	...	...	...	159	(153)
Influenza	...	...	...	147	(89)

2528 of the deaths or 60.7% were persons of 65 years and over, while 357 or 8.6% were children under 5 years of age.

A table giving the causes of death at specified ages will be found on page 8.

Number of women dying in, or in consequence of, childbirth :—

From Sepsis	...	...	...	9
From other causes	...	...	...	10
Total	...	...	...	19

Death-rate of infants under one year per 1,000 live births :—

Legitimate, 53.70.      Illegitimate, 73.58.      Total, 54.91.

Deaths from Measles (all ages) : 10.

Deaths from Whooping Cough (all ages) : 19.

Deaths from Diarrhœa (under 2 years of age) : 14.

The following table gives the death-rates per 1,000 population from certain causes, together with the corresponding rates for the previous five years :—

DISEASE.	1928.	1929.	1930.	1931.	1932.
Cancer	1.76	1.67	1.68	1.61	1.91
Respiratory Diseases	1.07	1.46	1.09	1.45	1.19
*Zymotic Diseases	0.25	0.27	0.11	0.13	0.22
Tuberculosis (Pulmonary)	0.55	0.61	0.57	0.51	0.52
„ (Non-pulmonary)	0.19	0.15	0.16	0.15	0.18

\*Smallpox, Measles, Scarlet Fever, Diphtheria, Whooping Cough, Enteric Fever, Diarrhœa (children under 2 years of age).

The following table gives the causes of death at specified ages :—  
(Figures given by Registrar General).

CAUSES OF DEATH.	Total All Ages.	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75
Typhoid and Paratyphoid Fevers ... ..	7	—	—	—	—	2	—	1	1	3	—	—
Measles ... ..	10	4	—	3	1	1	—	—	1	—	—	—
Scarlet Fever ... ..	1	—	—	1	—	—	—	—	—	—	—	—
Whooping Cough ... ..	19	12	5	2	—	—	—	—	—	—	—	—
Diphtheria ... ..	19	—	1	5	9	1	1	1	—	—	1	—
Influenza ... ..	147	2	1	—	5	2	5	9	18	18	26	61
Encephalitis Lethargica ... ..	8	—	—	—	—	1	2	1	—	1	2	1
Cerebro-spinal Fever ... ..	1	—	—	—	—	1	—	—	—	—	—	—
Tuberculosis of the Respiratory System ... ..	168	—	1	—	4	25	42	39	26	16	13	2
Other Tuberculous Diseases	59	8	6	7	7	10	6	4	3	3	2	3
Syphilis ... ..	7	4	—	—	—	—	—	—	2	—	1	—
General Paralysis of the insane, tabes dorsalis ... ..	7	—	—	—	—	—	—	—	3	3	1	—
Cancer, Malignant Disease	615	—	—	1	2	2	8	18	61	134	211	178
Diabetes ... ..	57	—	—	—	1	1	2	—	4	10	21	18
Cerebral Hæmorrhage, etc.	231	—	—	—	—	—	2	—	11	33	79	106
Heart Disease ... ..	819	—	—	—	1	4	6	22	32	90	257	407
Aneurysm ... ..	4	—	—	—	—	—	—	—	1	2	1	—
Other Circulatory Diseases	305	—	—	—	—	—	—	1	3	22	90	189
Bronchitis ... ..	161	9	1	1	—	2	—	1	5	1	37	104
Pneumonia (all forms) ... ..	195	35	11	10	10	4	2	15	10	21	34	43
Other Respiratory Diseases	31	—	1	—	2	1	2	1	2	2	7	13
Peptic Ulcer ... ..	31	—	—	—	—	1	3	3	4	11	5	4
Diarrhœa, etc. ... ..	22	10	4	1	—	—	1	1	—	—	—	5
Appendicitis ... ..	21	—	—	—	6	5	1	—	2	3	3	1
Cirrhosis of Liver... ..	7	—	—	—	—	—	—	1	1	—	3	2
Other Diseases of Liver, etc.	18	—	—	—	—	—	—	2	1	4	5	6
Other Digestive Diseases ... ..	78	4	—	3	6	3	3	5	8	11	22	13
Acute and Chronic Nephritis	120	—	—	1	3	2	6	6	13	13	36	40
Puerperal Sepsis ... ..	9	—	—	—	—	3	4	2	—	—	—	—
Other Puerperal Causes ... ..	10	—	—	—	—	1	7	2	—	—	—	—
Congenital Debility and Malformation, Premature Birth, etc. ... ..	159	153	—	2	2	1	1	—	—	—	—	—
Senility ... ..	252	—	—	—	—	—	—	—	—	—	18	234
Suicide ... ..	36	—	—	—	1	1	2	5	8	11	5	3
Other Violence ... ..	119	5	2	4	13	18	8	3	19	16	8	23
Other Defined Diseases ... ..	389	24	5	8	17	15	16	23	48	68	84	81
Causes Ill-defined or Unknown ... ..	24	—	—	—	1	—	1	—	—	3	11	8
All Causes ... ..	4166	270	38	49	91	107	131	166	287	499	983	1545



# LOCAL GOVERNMENT ACT, 1929.

## (a) Administration.

The arrangements for the discharge of the medical services transferred to the County Council under the Local Government Act, 1929, remain as stated in the Annual Report for 1930.

The Council's decision to increase the membership of the Public Health Committee and to make it function for all Public Health and Public Assistance matters under the title of Public Health and Assistance Committee has proved a wise one. It has thus been possible to deal with Maternity and Child Welfare, Tuberculosis, and Blind Persons Act work through the appropriate sub-committees without making any declaration under Section 5 of the Act.

## (b) Institutions.

There are approximately 757 beds (346 male, 411 female) available for sick in the Public Assistance Institutions.

The adaptation of the Swainsthorpe Institution for cases of senile dementia was completed during the year, and there is now accommodation for 174 cases (84 male, 90 female).

Owing to the necessity of making provision for the Norfolk cases previously accommodated in the Wisbech (Isle of Ely) Institution, the Downham Market Institution was enlarged considerably and the patients were transferred thereto in December, 1932.

In accordance with Section 13 of the Act, during the year consultations have taken place between representatives of the Norwich and Lynn Hospitals and the County Council. As a result of these negotiations the County Council has agreed to pay block grants to cover the various services rendered to the different committees by these hospitals.

## (c) Institutional provision for the care of mental defectives.

The Public Assistance Institution at Heckingham was transferred to the Mental Deficiency Acts Committee on 1st July, 1932. There is at present accommodation for 106 cases, but when the alterations now in hand are completed there will be 176 beds available (120 males, 56 females).

The Council's Mental Deficiency Colony at Little Plumstead Hall is being enlarged. When the modified building scheme is completed there will be accommodation for 256 patients (110 males, 146 females).

## (d) Poor Law Medical Out-Relief.

The County is divided into 13 areas for Public Assistance purposes, as follows. Beyond the filling of vacancies there has been no alteration in the administration of the out-door relief:—



Area No.	No. of Districts.	Rural and Urban Districts in Area.	Population 1931 Census.	No. of District Medical Officers.	No. of Public Vaccinators.	No. of Public Assistance Institutions
1	9	Erpingham Rural Cromer Urban Sheringham Urban	25 336	9	9	1
2	12	Aylsham Rural St. Faith's Rural	30,323	12	12	1
3	6	Blofield Rural E. & W. Fleggs Rural	24,574	6	6	1
4	5	North Walsham Urban Smallburgh Rural	18,123	5	5	—
5	9	Henstead Rural Forehoe Rural	23,689	9	9	2
6	4	Docking Rural Hunstanton Urban	19,416	4	4	—
7	6	Walsingham Rural Wells Urban	18,320	6	6	1
8	6	Freebridge Lynn Rural King's Lynn M.B. King's Lynn Rural	33,866	7	6	2
9	12	Downham Rural Marshland Rural Downham Urban Walsoken Urban	36 156	12	12	1
10	10	Mitford and Launditch Rural E. Dereham Urban	22,750	10	10	1
11	18	Swaffham Rural Thetford Rural Wayland Rural Swaffham Urban Thetford Municipal Borough	36,447	18	18	2
12	9	Depwade Rural Diss Urban	21,111	9	9	1
13	4	Loddon and Clavering Rural	11,822	4	4	—
Total	110	32	321,933	111	110	13

# GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

## Nursing in the Home.

### (a) General.

Professional nursing in the home is provided by the District Nursing Associations, the majority of which are affiliated to the Norfolk Nursing Federation. The Federation is assisted by grants from the County Council, with whom close co-ordination is maintained.

### (b) Infectious Diseases.

No arrangements are made by the County Council, but certain District Councils engage nurses temporarily in necessitous cases which cannot be dealt with otherwise.

## Laboratory.

The County Laboratory was established in 1920 for the purpose of providing public health laboratory facilities and is equipped for modern requirements. The Laboratory is always available for urgent work on Sundays and Public Holidays. The following table indicates the work of the Laboratory during the past five years:—

	1928	1929	1930	1931	1932
Swabs for diphtheria bacilli ...	2485	2574	2437	1292	2007
Swabs for hæmolytic streptococci	—	—	—	—	269
Swabs for Vincent's angina ...	—	—	—	4	1
Swabs for organisms ...	—	—	23	—	—
Sputum for tubercle bacilli ...	1239	1181	1049	1021	954
Urine for tubercle bacilli ...	19	25	26	22	20
Fæces for tubercle bacilli ...	2	13	1	2	2
Pus for tubercle bacilli ...	3	6	4	4	1
Cerebro-spinal fluid for tubercle bacilli ...	5	8	—	1	1
Pleural effusion for tubercle bacilli	—	—	5	10	8
Tuberculin dilutions prepared ...	5	19	35	30	47
Tuberculin ointment prepared ...	60	79	99	153	218
Milk for tubercle bacilli ...	10	3	—	—	3
Blood for Widal ...	83	59	56	42	61
Blood counts ...	3	7	2	—	2
Urine, various ...	20	19	23	30	15
Fæces for typhoid ...	13	12	5	8	5
Hairs for ringworm ...	3	3	7	3	6
Vaccines prepared ...	11	4	4	4	2
Milk for cleanliness ...	—	—	—	20	126
Milk for Br. Abortus ...	—	—	—	20	255
Milk various ...	2	—	3	—	—
Shellfish for B. Coli ...	10	—	30	—	110
Specimens of sewage and river water ...	—	—	—	—	36
Specimens of water ...	47	104	112	95	115
Smears for organisms ...	22	10	8	18	10
Miscellaneous specimens ...	19	24	33	14	15
Totals ...	4061	4150	3962	2793	4289



Foodstuffs are examined by the Public Analyst who is a part-time officer and has his own laboratory.

### Legislation in Force.

The County Council has promoted no Local Acts, Special Orders or bye-laws relating to Public Health for the area.

### Hospital Services.

No alterations have been made in the hospital services as outlined in the Annual Report for 1930.

There has been no extension in the existing Isolation Hospital accommodation and the majority of the population is still unprovided for in this respect. Arrangements are in force between the City of Norwich Authority and certain District Councils whereby patients can be admitted to the Norwich Isolation Hospital provided accommodation is available.

No further progress has been made with regard to the provision of a Central Isolation Hospital.

### Ambulance Facilities.

#### (a) Infectious Cases.

The County Council has no ambulance.

The Wisbech Hospital (serving Marshland R.D. and Walsoken U.D.) has an ambulance, and some of the other hospitals have an old car or cab kept for this purpose. Others hire a car as required and disinfect it afterwards.

#### (b) Non-infectious Accident Cases.

The County Council has no ambulance, but the Order of St. John of Jerusalem and the British Red Cross Society have ambulances stationed at the following places:—Attleborough, Cromer, Downham Market, East Dereham, Fakenham, Hunstanton, and Swaffham. There are also affiliated ambulances at King's Lynn, North Walsham, and Norwich. During the year, 2122 cases were conveyed, the total mileage being 59223 miles.

## MATERNITY AND CHILD WELFARE.

### Area.

The County Council is responsible for the Maternity and Child Welfare arrangements throughout the whole of the administrative county with the exception of King's Lynn.

### Midwifery Services.

All midwives certified under the Midwives Acts must notify the County Council each year of their intention to practise within the administrative county. The following table is a brief summary of such notifications received during 1932:—

			Cert. C.M.B.	Bona- fide.	Total.
Permanent	...	...	167	4	171
Temporary	...	...	5	—	5
			<hr/>	<hr/>	<hr/>
	Total	...	172	4	176
			<hr/>	<hr/>	<hr/>



It is gratifying to note that year by year there has been a steady though slow increase in the number of parishes provided with the services of a district-nurse midwife. Of the 690 parishes in the County, by the end of the year 452 were covered by 125 district nurses undertaking midwifery. Of these 119 are affiliated to the Norfolk Nursing Federation. In addition 45 independent midwives practise in the county and it is estimated that their work covers approximately 70 parishes. It would therefore appear that in over 140 parishes there is no provision for a skilled midwife at the time of confinement. Many of these cases no doubt are attended by the family doctor assisted by the patient's "next door neighbour" or a handy-woman. A very small minority of the cases are confined in the Public Assistance Institutions. It is conceivable that a small number of cases may even dispense with the services of a doctor, more particularly where the birth is illegitimate. It is significant that the mortality rate of illegitimate children under one year of age has increased steadily during the last three years. There can be no doubt that the provision of Maternity and Child Welfare Centres and Infant Health Visiting should do much to reduce maternal and infantile mortality. It is noteworthy, however, that in spite of extension in both directions there has been no material reduction in either of these figures, and the sooner *all* parishes can be provided with the services of a competent nurse-midwife the better from a public health point of view.

### Training of Midwives.

The County Council makes a grant of £30 in respect of each midwife permanently appointed in the County, working under the auspices of the Norfolk Nursing Federation.

### Inspection of Midwives.

Under the Midwives Acts, 1902, 1918 and 1926, the County Council is the Local Supervising Authority throughout the whole of the Administrative County. The Inspector of Midwives and Superintendent Health Visitor is also Superintendent of the County Nursing Association. There are three Assistant Inspectors—one appointed by the County Council and two by the Norfolk Nursing Federation.

518 routine inspections were made during the year, being an average of 3 visits per midwife.

Under the rules of the Central Midwives Board, midwives are required to summon medical help under certain specified emergencies and to notify the Local Supervising Authority that they have done so. 388 notifications were received during 1932 (310 for mothers and 78 for infants), *i.e.*, 28.96% of the cases attended by midwives.

During 1932, 2916 births were attended by midwives; 1340 as midwifery cases and 1576 as maternity cases.

The following table gives a summary of the number of cases in which midwives summoned medical aid during the past five years:—

Year.		No. of Mid- wifery Cases.		No. of Medical Aid Forms Issued.
1928	...	1217	...	337
1929	...	1221	...	297
1930	...	1130	...	367
1931	...	1368	...	388
1932	...	1340	...	388

## PUBLIC HEALTH (OPHTHALMIA NEONATORUM) REGULATIONS, 1926.

Cases.			Vision Unimpaired.	Vision Impaired.	Total Blindness.	Deaths.
Notified.	Treated.					
	At Home.	At Hospital.				
14	13	1	14	—	—	—

## PUBLIC HEALTH (PUERPERAL FEVER AND PYREXIA) REGULATIONS, 1926.

Disease.	No. of Cases Notified.	No. of Cases where Trained Nurse provided by Council.	No. of applications for 2nd opinion.	No. of Cases removed to Hospital.
Puerperal Fever	10	2	1	7
Puerperal Pyrexia	39*	1	5	13*

\*Includes one case originally notified as Fever.

The County Council's scheme includes the service of Consultants, provision of a nurse in the home, hospital accommodation and bacteriological facilities. In each case where a second opinion is provided under the scheme, the Consultant submits a special report to the County Medical Officer.

There has been no difficulty in obtaining hospital beds for puerperal cases. When all other methods fail, patients can be admitted to the Norwich Isolation Hospital, provided accommodation is available.

### Abnormal Maternity Cases.

The County Council has an arrangement with the Addenbrooke's Hospital, Cambridge, for the admission of cases of anticipated abnormal labour. Three patients were admitted during the year, and in cases where the County Council pays the maintenance charges patients are required to contribute in accordance with their means.

### Maternal Mortality.

Maternal deaths are personally investigated by the C.M.O., and a confidential report submitted to the Maternal Mortality Committee of the Ministry of Health. The causes of these deaths during the year as given by the Registrar General were as follows:—

Puerperal Sepsis	...	...	...	9
Other Puerperal causes	...	...	...	10
				—
TOTAL	...	...	...	19
				—

In 12 cases reports were submitted to the Ministry and with one exception the remaining cases were not notified to the C.M.O.



# INFANTILE STATISTICS.

## RURAL.

Sanitary District.	Estimated Population.	Total L. Births.	Birth Rate 1931.	Birth Rate 1932.	Deaths under 1 year. 1932.	Infantile Death Rate 1931.	Infantile Death Rate 1932.
Aylsham ...	16,080	240	13.91	14.93	11	62.22	45.83
Blofield ...	14,740	228	14.50	15.20	9	23.70	39.47
Depwade ...	17,590	263	14.42	14.95	13	86.61	49.43
Docking ...	16,380	245	17.72	14.96	12	52.45	48.98
Downham ...	15,460	273	20.19	17.66	23	53.97	84.25
Eppingham ...	16,820	220	14.29	13.71	14	50.42	63.64
Flegg, E. & W. ...	10,340	182	17.81	17.60	10	44.69	54.95
Forehoe ...	13,060	219	18.08	16.77	9	34.33	41.10
Freebridge Lynn ...	12,410	175	11.92	14.10	8	27.21	45.71
Henstead ...	10,910	176	15.34	16.13	9	79.27	51.14
Loddon and Clavering ...	11,740	205	15.59	17.46	10	43.48	48.79
Lynn, West ...	963	9	20.28	9.35	—	157.89	—
Marshland ...	14,100	240	19.48	17.02	17	75.81	70.83
Mitford and Launditch ...	16,930	231	14.96	13.64	10	39.22	43.29
St. Faith's ...	14,800	254	18.06	17.16	10	39.06	39.37
Smallburgh ...	13,980	195	13.69	13.95	15	42.55	76.92
Swaffham ...	6,768	96	13.29	14.18	4	66.67	41.67
Thetford ...	9,239	148	20.94	16.02	10	61.54	67.57
Walsingham ...	15,740	221	15.05	14.04	13	58.82	58.82
Wayland ...	13,050	200	16.09	15.33	15	56.87	75.00
TOTAL ...	261,100	4020	16.04	15.40	222	53.30	55.22

## URBAN.

Cromer ...	4,065	53	9.37	13.04	2	—	37.74
East Dereham ...	5,719	88	16.02	15.39	2	55.56	22.73
Diss ...	3,467	38	12.36	10.96	—	95.24	—
Downham ...	2,436	41	13.03	16.83	1	—	24.39
Hunstanton ...	2,892	24	9.38	8.30	—	—	—
Sheringham ...	4,037	50	10.12	12.39	1	100.00	20.00
Swaffham ...	2,734	38	13.45	13.89	3	54.05	78.95
North Walsham ...	4,200	58	13.56	13.81	3	71.43	51.72
Walsoken ...	4,081	59	20.40	14.46	5	60.24	84.75
Wells-next-Sea ...	2,482	32	12.92	12.89	1	31.25	31.25
King's Lynn M.B. ...	20,450	350	16.36	17.11	27	44.78	77.14
Thetford M.B. ...	4,097	66	12.40	16.11	3	58.82	45.45
TOTAL ...	60,660	897	14.29	14.79	49	49.33	53.51

Total for Administrative County ...	321,760	4,917	15.71	15.28	270	52.70	54.91
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Infantile Mortality.

The number of deaths under one year of age was 270, giving a net death rate of 54.91 per 1000 births, as compared with 65.00 in England and Wales. The infant death-rates for the previous five years are given below :—

1927	1928	1929	1930	1931
<hr/> 65.65	<hr/> 56.04	<hr/> 59.99	<hr/> 46.93	<hr/> 52.70

22 deaths occurred in illegitimate children under one year of age, representing a death rate of 73.58 per 1,000 illegitimate live births. This shows an increase of 3.89 on the rate for 1931, which was 69.69.

Notification of Births.

All births occurring in the Maternity and Child Welfare areas are notifiable direct to the County Medical Officer under the Notification of Births Acts, 1907 and 1915, as amended by the Notification of Births (Transfer) Order, 1930. Each case is followed up by a Health Visitor and any defects found are reported and dealt with under appropriate schemes.

The following are particulars of births occurring during the year :—

Births notified in the County Maternity and Child Welfare Area :—

	Live Births.	Still-births.	Total.
By Doctors ... ..	2901	126	
By Midwives ... ..	1130	30	
By Parents ... ..	4	—	
	<hr/> 4035	<hr/> 156	4191

Births notified in King's Lynn M.B. :—

By Doctors ... ..	166	5	
By Midwives ... ..	171	1	
	<hr/> 337	<hr/> 6	343

Total births notified	...	...	4534
Births reported by registrars as registered, but not notified	...		178
Births not reported	...	...	384
Total births registered	...	...	<hr/> 5096

4917 live, and 179 still-births were registered, whilst 4372, and 162 respectively were notified under the Acts; 178 were reported by registrars as registered, but not notified. The total births of which particulars were received was 4712 compared with 5096 registered. Thus no particulars have been received of 1 birth in every 13.

N.B. slips, G.R.O. in respect of every birth or still-birth notified are sent monthly to the registrars in order that they may be compared with the registers and a return made of those registered but not notified. As it was obvious that some of the registrars were not sending in complete returns their attention was called, towards the latter part of the year, to the importance of this matter. It is hoped that next year this discrepancy will have disappeared.

## Health Visiting.

There has been no material change in this work during the past year. The five whole-time Health Visitors also act as Infant Life Protection Visitors, and 121 District Nurses act as Health Visitors in a part-time capacity. The following table indicates the growth of health visiting during the past five years :—

Year.	Parishes Covered.			Parishes Unprovided.	Total.
	By Whole-time Health Visitors.	By Nurses from Local Associations as part-time Health Visitors.			
		Affiliated.	Non-affiliated.		
1928	112	404	9	165	690
1929	112	409	5	164	690
1930	192	440	10	48	690
1931	256	424	10	—	690
1932	254	421	15	—	690

The following table gives particulars of the Health Visitors' work during the past five years.

Year.	Expectant Mothers.		Infants under 1 year.		Children 1—5 years.	Grand Total.
	First Visits.	Total Visits.	First Visits.	Total Visits.		
1928	2804	7429	2925	21553	56437	85419
1929	2106	7028	2846	23863	56509	87400
1930	2354	8492	3340	24369	59003	91864
1931	2589	9439	4417	34117	76981	120537
1932	2709	9933	4305	34928	84258	136133

## Maternity and Child Welfare Centres.

In connection with the provision of welfare centres the County Council has agreed that the needs of the County would be better met by concentrating on a comparatively small number of large centres, which with transport facilities would be capable of serving the whole area, rather than on a large number of small centres ill-attended and ill-equipped which could not be provided with a medical officer at each session.

Previous to 1931 there were no County Council Maternity and Child Welfare Centres, but in that year seven were established or transferred. In 1932 a further centre was established and three more transferred, making a total of 11 County Council centres by the end of the year.

More centres are needed and would have been provided but for the financial crisis which has overshadowed the year under review.

At one of the Council's centres arrangements for transporting mothers from outlying parishes are already being carried out privately by a member of the voluntary committee. Transport facilities are also provided at a few of the voluntary centres. Similar arrangements for all the county centres would enable larger areas to be served and thus materially increase the attendances.

The following table gives particulars of attendances at the centres during the year :—



Centre.	Address.	First Attendances.		Total Attendances (Including First).		No. of Sessions.	Average Attendance.
		Under 1 year.	1-5 years.	Under 1 year.	1-5 years.		
(1) County Council Centres—							
Aylsham ...	Scouts' H.Q. Hut, Peterson's Lane	66	21	251	386	15	42.5
Costessey ...	Parish Hall ...	31	28	119	191	12	25.8
Docking ...	Oddfellows' Hall...	22	17	142	335	22	21.7
aFakenham	Courthouse ...	21	34	21	34	1	55.0
Hingham ...	Lincoln Hall ...	19	3	76	151	12	18.9
bHolt ...	Church Hall ...	19	15	76	152	18	12.7
Norwich ...	31, Thorpe Road...	39	36	149	100	22	11.3*
cSheringham	St. Peter's Church Hall ...	39	14	261	357	23	26.9
Swaffham ...	Baptist Chapel School Room ...	22	10	110	170	12	23.3
dWells ...	Friends' Meeting House ...	16	40	22	49	2	35.5
Wymondham	Methodist School- room ...	36	17	138	139	12	23.1
(2) Voluntary Centres—							
Blofield ...	Parish Hall ...	21	3	174	292	25	16.6
King's Lynn	St. James' Park ...	124	48	1209	1851	50	61.2
Thetford ...	Old Malting House Dr. Sturdee's	45	7	312	237	24	22.8
Walsingham	Surgery ...	17	6	45	27	11	6.5
Woodbast- wick	The Hospital ...	4	—	18	83	11	9.2
(3) Centres Outside Adm. County—							
*Beccles ...	Beccles ...	2	7	17	105	52	2.4
*Wisbech and Walsoken	Church House ...	34	9	305	148	51	8.9



As the County Council's centres become more firmly established there are numerous other activities which should be undertaken, viz:—Talks to mothers, Clothing Stalls, Thrift Clubs, and the like.

In October 1932, fortnightly sessions were commenced at the Aylsham centre, and as a result the attendances have fallen somewhat, but the average is still over 30 per session.

Fortnightly sessions have also been in operation at the Norwich Centre throughout the year, but with less successful results, the average attendance having dropped to 11 infants and it may become necessary to revert to monthly sessions again. This centre, of course, serves a very scattered area, and the mothers attending often have to travel a considerable distance.

### Ante-Natal Work.

It will be observed that these figures only relate to the attendances of children. At each of the County Council's centres, while there is no separate ante-natal clinic, expectant mothers can consult the medical officer at any session. These facilities have only been taken advantage of to a small extent. Undoubtedly the Norfolk mother is very conservative, but in time may avail herself more fully of the services provided.

Ante-natal work is definitely appreciated at three of the voluntary centres. Curiously enough the largest centre (King's Lynn), with an average attendance of over 60 infants, shows ante-natal figures as follows for the year ended December 31st, 1932:—

First Attendances	...	...	...	12
Total	...	...	...	29

Thetford with an average of 23 infants attending per session, holds a separate ante-natal clinic monthly at the Cottage Hospital, and the attendances were as follows:—

First Attendances	...	...	...	39
Total	...	...	...	79

The smallest centre of all, viz. Walsingham, with an average attendance of 7 infants per session, gives the best record of ante-natal work in the whole county. Here ante-natal clinics are not held monthly or even weekly but being conducted at the local doctor's surgery patients are allowed to attend during the usual surgery hours. Their attendances are as follows:—

First Attendances	...	...	...	44
Total	...	...	...	204

One may well enquire why the figures at these two latter centres are so high, particularly the total attendances at Walsingham. In both cases the Medical Officers are engaged in private practice in the district covered, are keen on ante-natal work, and the midwives encouraged to bring their cases. Furthermore, at Walsingham, mothers can attend for examination practically when they choose. More ante-natal clinics on these lines, together with arrangements for the services of a gynæcologist, are needed.

### Post-Natal Work.

At all centres in the County mothers are encouraged to consult the doctor concerning their own health in connection with former pregnancies. Mothers attending centres solely for the purpose of accompanying children are not recorded as post-natal attendances.

In connection with the Thetford Welfare Centre, a separate post-natal clinic has been established at the Public Assistance Institution. During the year 115 sessions were held and the attendances numbered 348.

### **Weighing Centres.**

A number of centres have been established by voluntary agencies, usually the local nursing associations, helped in certain cases by the local detachment of the British Red Cross Society. These centres are not assisted by grants from the County Council. They comprise;—

Attleborough, Bawdeswell, Brancaster, Brooke, Buxton, Cley-next-Sea, Coltishall, Dereham, Diss, Earsham, Gunton, Hardingham, Hilgay, Hunstanton, Kenninghall, Long Stratton, Mulbarton, North Walsham, Harleston, Saxlingham, Shotesham, Stanhoe, Syderstone, Stoke Holy Cross, Thornage, Thorpe St. Andrew, Woodton.

### **Milk Scheme.**

Of the 32 sanitary districts, 12 continue to administer the County Council's Scheme, 2 have their own arrangements, and the remaining 18 are dealt with direct by the County Medical Officer. All applications from the latter category are considered by a Special Sub-Committee of the County Council. The districts administering the scheme deal with scale cases through their Medical Officers of Health, ex-scale applications being referred to the special county Sub-Committee for consideration.

During 1932, the District Medical Officers of Health issued 398 certificates in respect of 106 individuals, and the County Medical Officer issued 757 certificates for 184 cases. Although in a few very exceptional cases 2 pints daily are granted, the majority of these certificates authorise 1 pint daily for a month.

These figures show a remarkable decrease over those for the preceding year, due entirely to the effect of the reduced scale now in force, particulars of which are set out in the Annual Report for 1931.

### **Dental Scheme for Necessitous Expectant and Nursing Mothers.**

Under this Scheme, which was established in 1926, the County Council has established a panel of fully qualified dental surgeons who carry out treatment at their surgeries throughout the county at the same fees as those in force for National Health Insurance cases.

The scale of contributions given in the 1931 report continues with two modifications:—

(1) No case is considered where the net income per week exceeds 10/- per head.

(2) When dentures are provided patients are required to pay double the scale contribution required for extraction or fillings; the lowest scale charge is £1 16s. 8d. for complete upper and lower dentures.

The Committee considers each case on its merits, however, and in exceptional cases reduces the contribution below the scale.

The following tables indicate the development of the scheme since 1927, and here again the effect of a more rigid scale can be noticed in the reduction of applications for treatment and dentures during the past year.



## Treatment.

### (i.) Extractions, Fillings, Scaling.

Years.			Class I.	Class II.	Class III.	Total.
1927	...	...	27	10	4	41
1928	...	...	26	11	1	38
1929	...	...	80	32	2	114
1930	...	...	161	57	13	231
1931	...	...	243	125	9	377
1932	...	...	49	11	5	65

### (ii.) Dentures.

Years.			Class I.	Class II.	Class III.	Total.
1927	...	...	17	4	2	23
1928	...	...	11	4	—	15
1929	...	...	57	26	1	84
1930	...	...	75	20	11	106
1931	...	...	154	65	8	227
1932	...	...	149	62	1	212

The large number of cases in which dentures were provided compared with extractions, fillings and scaling, is due to the fact that many cases which had extractions, etc., in 1931 were not assisted with the provision of dentures until 1932.

It is remarkable that the majority of our applications are for extractions *and* dentures, especially so when the applicants are young women in the early twenties.

Under the Education Committee's Scheme every child attending an Elementary School is inspected and offered treatment where found necessary, yet during the year in question less than 50% of such children accepted treatment, which in no case costs the parents more than a nominal shilling. Even this can be excused if financial circumstances warrant it.

For some inexplicable reason there exists a rooted objection to having "fillings," and practically all the mothers when interviewed frankly state that they prefer to have the mouth cleared, fondly imagining that once this is done and artificial teeth provided their troubles are over. Time alone will show them the fallacy of such conclusions! The importance of conservative dental treatment cannot be over-exaggerated.

### Infant Life Protection (Part I of Children Act, 1908).

Arrangements continue as outlined in the 1931 Report, the whole-time health visitors acting as Infant Life Protection visitors in their districts and the remainder of the county being covered by the whole-time school nurses.

Primary reports are made on the home, the foster-parent, and the nurse child. Subsequent visits are paid usually at 3—4 monthly intervals, but in cases where conditions do not appear to be entirely satisfactory more frequent inspections are made.

Two deaths of infants were reported during the year.

No cases arose which necessitated legal proceedings under Part I of the Children Act.

The following figures indicate the position at the beginning and end of the year 1932:—



# 1. FOSTER PARENTS.

No. on Register on January 1st, 1932	...	193
No. removed from Register during year	...	84
No. of new registrations	...	78
No. on Register on December 31st, 1932	...	187

# 2. NURSE CHILDREN.

No. on Register on 1st January, 1932	...	265
No. removed from Register during year :—		
(a) To parents or Benevolent Societies	51	
(b) Attained age of 7 years	...	53
(c) Adopted by Foster Parents	...	2
(d) Removed to Public Assistance Institutions	...	5
(e) Removed to other counties	...	4
(f) Died	...	2
(g) Miscellaneous	...	13
	—	130
No. of new registrations	...	110
No. on Register on December 31st, 1932	...	245

# 3. Visits made by Inspectors during year.

No. of Primary Reports :—		
(a) Homes	...	89
(b) Nurse Children	...	99
No. of further reports on Nurse Children	...	812
Total	...	1000

## Maternity and Nursing Homes.

All Homes which apply for registration are visited by the County Medical Officer, and, if found suitable, registered.

The County Council has adopted the model bye-laws. Each home when registered is supplied with a register, receipt book, and a copy of the bye-laws. Periodical visits are made to the registered homes, the inspecting officers being the County Medical Officer, the Deputy County Medical Officer and the Inspector of Midwives.

The following table gives particulars of the action which has been taken under the Nursing Homes Registration Act, 1927, during the year ended 31st December, 1932 :—

No. of applications for registration	...	2
No. of Orders cancelling registration	...	3
Total No. of Homes registered at 31st Dec., 1932 :—		
Maternity Cases only	...	2
Medical and Surgical Cases only	...	3
Maternity and General cases	...	14
	—	19
No. of appeals against Orders cancelling registration	...	Nil
No. of applications for exemption	...	„
No. of exemptions (a) granted	...	„
(b) refused	...	„

No applications have been received under Section 9 (2) of the Act, for delegation of powers.

## **SANITARY CIRCUMSTANCES.**

### **Rivers and Streams.**

A complaint was received from the Great Yarmouth Waterworks Company that the discharge from a ditch at Coltishall was likely to affect the River Bure above their intake at Horning. The conditions were investigated and the resulting analysis showed that the river was not appreciably affected. Samples have been taken at regular intervals and so far these have given the same result.

In 1930 the Norwich Corporation called attention to the likelihood of the overflow from certain cesspools at Hellesdon polluting the river from which their water supply is obtained. At the request of the Rural District Council samples of water from a ditch into which any overflow would ultimately find its way have been taken at intervals. Up to the present it has not been necessary to take any action as a result of these analyses.

During the year it was alleged that a stream at Gressenhall had been polluted by a discharge of sewage from the Gressenhall Public Assistance Institution. Investigation showed that while improvements to the sewage disposal works were in progress at the Institution a certain amount of crude sewage was discharged direct into the stream. At the same time some alterations were being made to a sluice gate which necessitated lowering the level of the water in the stream. The effluent from the East Dereham sewerage works is also discharged into the stream above the weir. It is difficult to say whether the crude sewage from the institution, the release of an accumulated amount of detritus when the sluice gates were opened, or a combination of these factors, were the cause of the complaint, but there certainly was considerable pollution. An analysis was made of the effluent from the East Dereham works. This was not satisfactory and the Urban District Council is dealing with this matter. It is unlikely therefore, that this pollution will recur.

No other complaints have been received during the year.

### **Sanitary Defects.**

During the year about 120 complaints were received regarding nuisances, housing defects, etc. These were referred to the local sanitary authorities for action.

### **Housing.**

The Census of 1931 reveals that there were 85,858 structurally separate buildings occupied, compared with 78,168 recorded in 1921, an increase in ten years of 7,690 houses.

During the past few years considerable difficulty has been experienced in estimating the amount of overcrowding occurring throughout the county as a whole. Table 11 of the Census, which classifies families in accordance with their size and the number of rooms they occupy, both in respect of the administrative county and the individual districts, supplies up-to-date information on this problem, and might advantageously be considered by each District Council. For example, it is shown that in the administrative county there are 484 houses of one room only; one is occupied by 9 persons; two by 7 persons; one by 6 persons, nine by 5 persons; eighteen by 4 persons; and twenty-seven by 3 persons. A similar state of things exists with regard to 2, 3 and 4 roomed houses.



Under Section 8 of the Housing Act, 1925, it is the duty of each Local Authority to arrange a periodical inspection of all the houses in its district. The Returns received from the twenty rural district councils under Section 32 (2) of the Housing Act, 1930, indicate that nine councils either have made a complete survey since 1930 or are in the process of doing so. In two districts surveys were carried out in 1923-25 and in 1918 respectively, while in the remaining nine districts the last complete survey was apparently made prior to the Great War.

The rural district councils in their returns estimated that 1059 new houses were required; the number of applications for such houses was stated to be 2,070, but the number of houses approved for construction on December 31st, 1932, was only 445. From these figures it would appear that no less than 1,600 additional houses are needed. Furthermore, if all houses throughout the county which are unfit for human habitation and cannot be made so at reasonable cost were dealt with under the 1930 Act, either as individual unfit houses or as part of clearance areas, no doubt the figure of 1,600 would be considerably exceeded.

Under the various Housing Acts prior to 1925 subsidies were granted for all houses approved by the Minister and as a result over 5,000 have been constructed in the administrative county by the various local authorities. Unfortunately many of the older houses were not demolished and the poorer families gravitated into these with consequent overcrowding. Under the present enactments it is impossible to provide houses other than for those replaced, except by private enterprise. The bulk of the population in the county comprises agricultural labourers and those engaged in similar occupations where their wages are only 30/- per week and their family legion. Obviously the majority cannot afford an economic rent and private enterprise is not likely to provide houses for such cases.

The retention of the subsidy for re-housing under the 1930 Act will help the local authorities in dealing with this problem, but the measure is not sufficient as at the most it will only provide for the replacement of an old house by a new one—it will not provide *additional* houses.

### Housing (Rural Workers) Acts.

In 8 districts 42 applications were received for assistance under the Housing (Rural Workers) Acts. 24 of these were granted and 1 case was under consideration at the end of the year.

### Closing and Demolition Orders.

21 closing orders (or undertakings in lieu thereof) and 29 demolition orders were made by the rural district councils during 1932.

The following table shows the number of houses erected, or in course of erection by the Rural District Councils during 1932 :—

District.	No. of houses.	District.	No. of houses.
Aylsham	24	Loddon & Clavering	Nil
Blofield	10	Freebridge Lynn	8
Depwade	16	West Lynn	Nil
Docking	58	Marshland	52
Downham	34	Mitford & Launditch	12
Erpingham	Nil	Smallburgh	36
St. Faith's	6	Swaffham	10
E. & W. Flegg	57	Thetford	8
Forchoe	40	Walsingham	40
Henstead	No return	Wayland	28



Up to 31st December, applications have been received and approved from 10 Rural District Councils for the erection of 276 houses for agricultural workers under section 34 of the Housing Act 1930.

## **Schools.**

### **(a) WATER SUPPLY.**

In very few cases are the Elementary Schools in the County connected to a main water supply, this, of course, being mainly confined to the Urban Districts. The majority of schools have wells on the premises, but where this is not the case water for drinking purposes is obtained by arrangement from neighbouring wells.

The Assistant Medical Officers when at the schools report on the hygienic and sanitary conditions and any such matters requiring attention are referred to the Education Committee.

### **(b) INFECTIOUS DISEASES.**

In connection with outbreaks of infectious disease in Elementary Schools it is the duty of the Head Teachers to send immediate notifications on an approved form simultaneously to the District Medical Officer of Health and to the School Medical Officer in respect of any child suspected or known to be suffering from or in contact with any disease of an infectious nature. Close co-operation is maintained with the respective District Medical Officers of Health.

## **MILK.**

In the administrative county there are over 3,000 premises registered for the production and retailing of milk; of these at the end of 1932 four were licensed for Certified Milk, four for Grade A TT. and four for Grade A. under the Milk (Special Designations) Order, 1923.

The Clean Milk Campaign continues, and with a view to assisting District Medical Officers of Health and Sanitary Inspectors, arrangements have been made for samples to be examined for cleanliness at the County Laboratory free of charge. 126 of these samples were dealt with during the year. In cases where the result is unsatisfactory the Sanitary Inspector visits the cow keeper concerned and recommends any necessary improvements in methods or apparatus. The case is then followed up at a later date and further samples taken to illustrate the effect of carrying out the advice given.

During 1932 10 cases involving 12 farms were investigated under Section 4 of the Milk and Dairies Consolidation Act, 1915, resulting in the slaughter of 5 animals under the Tuberculosis Order, 1925. The usual procedure of group sampling followed by separate samples from each cow in positive groups was carried out until the infected animals were ascertained.

Samples were also taken from 9 other farms, but with a negative result in each case.

## INFECTIOUS DISEASES.

The following table gives particulars of notifications of infectious diseases, and the number of deaths for certain of the diseases during 1932 :—

Disease.	No. of cases notified.	Deaths as given by Registrar-General.
Small Pox ... ..	1	—
Scarlet Fever ... ..	377	1
Diphtheria ... ..	191	19
Enteric Fever ... ..	26	7
Pneumonia ... ..	261	195
Puerperal Fever ... ..	10	9
Puerperal Pyrexia ... ..	38	10
Polio-myelitis ... ..	5	1
Encephalitis Lethargica ... ..	4	8
Ophthalmia Neonatorum ... ..	14	Not given
Erysipelas ... ..	69	Not given
Tuberculosis (Pulmonary) ... ..	346	168
Tuberculosis (Non-Pulmonary) ... ..	222	59
Chicken-pox ... ..	523	Not given
Anthrax ... ..	1	Not given
Measles ... ..	15	10
Cerebro-Spinal Fever ... ..	4	1
Total	2,107	488

The case of Small Pox occurred in a town about 9 miles from Norwich. The disease was prevalent within the City, and the patient undoubtedly contracted it whilst shopping there. She was admitted to the Norwich Small Pox Hospital and recovered. No further cases occurred.

## ORTHOPÆDIC TREATMENT SCHEME.

A sight which probably arouses the sympathy of most people is that of a severely crippled child. The actual deformity seems bad enough, but when we realise that such a condition so often means the afflicted child cannot attend to its own needs, but has to have extra attention and may prove to be unemployable in later life, the position is far worse. We cannot but appreciate the patience of those suffering in this way and of parents who have such a responsibility placed upon them. The ravages of the war opened up a new sphere of activity for the surgeon, and the knowledge acquired in the surgical treatment of wounded soldiers, coupled with the opportunity of securing experience in such work, has caused our medical men to focus their attention on the prevention and correction of crippling deformities during the past 15 years. Voluntary hospitals have done their best to provide treatment but in many instances the lack of suitable accommodation and shortage of funds have considerably curtailed their activities. The treatment of a crippled child often extends over a long period, necessitating it may be 3 or 4 years continuous in-patient treatment and the ordinary voluntary hospital is not prepared to deal with such cases as these. It is in this connection that a Local Authority can find plenty of scope for a service which cannot but be of immense benefit to those within its borders who are



disabled either to a greater or lesser extent by crippling deformities. The ideal organisation is an orthopædic hospital associated with clinics established in various parts of the County which are attended weekly by the Orthopædic Nurse, and fortnightly, or monthly, by the Orthopædic Surgeon from the parent institution. The County Council scheme does not at present approach this ideal, but is fulfilling a long felt want and is doing useful and beneficial work.

The following particulars refer chiefly to the treatment of tuberculous cases and children under school age. In order, however, to show the full scope of the Scheme, figures are included respecting Education cases. Full details respecting the latter will be found in my report as School Medical Officer.

1. **Ascertainment.**

211 new cases were reported upon during 1932, 104 of school age, 97 under school age, and 10 tuberculous. Practically the whole of the cases of school age were reported by the Assistant Medical Officers and School Nurses in the course of their routine inspection, and the majority of those under school age by the Health Visitors and District Nurses.

The number of cases of anterior poliomyelitis (infantile paralysis), which is often the cause of severe crippling, does not appear to be on the increase. No epidemic of this disease has troubled Norfolk and while the number of cases (68) on the register seems rather considerable, yet it must be remembered that it is the cumulative effect of several years. Recovery, if any, is very slow and treatment over many years is often required.

2. **Clinics held by the Orthopædic Surgeon.**

Inspection clinics have been held and children examined as follows :—

Centre.	No. of clinic sessions.	Cases Examined.						Total.
		Maternity and Child Welfare.			Tuberculosis.			
		New.	Re-exam- inations.	Approval of appara- tus.	New.	Re-exam- inations.	Approval of appara- tus.	
Norwich ...	19	33	42	18	2	3	1	99
King's Lynn ...	1	2	4	—	—	—	—	6
Downham ...	1	1	—	—	—	—	—	1
TOTAL ...	21	36	46	18	2	3	1	106

In addition to the above, 163 children of school age were examined and also two Public Assistance cases, a total of 271, which is about the same as last year.



### 3. Institutional Treatment.

#### (a) Maternity and Child Welfare Cases.

Institution.	Receiving treatment 1.1.32.	Admitted during year.	Discharged during year.	Receiving treatment 31.12.32.	Awaiting admission 31.12.32.
Jenny Lind Hospital, Norwich	—	10	8	2	3
Royal National Orthopaedic Hospital, London	2	3	*4	1	—
TOTALS ...	2	13	12	3	3

\*One child had three periods of in-patient treatment and was thrice discharged during the year.

#### (b) Tuberculous Cases.

Institution.	Receiving treatment 1.1.32.	Admitted during year.	Discharged during year	Died in Institution.	Receiving treatment 31.12.32.	Awaiting admission 31.12.32.
Jenny Lind Hospital, Norwich ...	1	1	2	—	—	—
Norfolk & Norwich Hospital, Norwich	—	1	1	—	—	—
West Norfolk and Lynn Hospital, King's Lynn ...	—	3	†3	—	—	—
War Memorial Hospital, Beccles ...	2	—	2	—	—	—
St. Vincents Orthopaedic Hospital, Eastcote, Middlesex ...	1	—	—	1	—	—
Lord Mayor Treloar Cripples Hospital, Alton, Hampshire	2	—	1	—	1	—
St. Nicholas and St. Martins Orthopaedic Hospital, Pyrford, Surrey ...	13	5	*7	—	11	—
Royal National Orthopaedic Hospital, London ...	1	—	—	—	1	—
Children's Hospital, Gringley, Yorkshire	1	—	1	—	—	—
TOTALS ...	21	10	17	1	13	—

†One child had two periods of in-patient treatment and was discharged twice during the year.

\*Includes two cases diagnosed as non-tuberculous and responsibility assumed by Education Committee.

The treatment of the 10 individual Maternity and Child Welfare cases discharged during the year has been analysed as under : —

INSTITUTION.	DIAGNOSIS OR DEFORMITY.	NO. OF CASES TREATED.	TREATMENT.	RESULT OF TREATMENT.
Jenny Lind Hospital, Norwich	Rickets	2	General treatment	} Much improved
		1	Osteoclasis of tibiae	
	Congenital talipes equino varus	2	Tenotomy of tendo achillis	} Deformity corrected
		1	Tenotomy of both tendo achilles and of anterior and posterior tibials	
Royal National Orthopædic Hospital, London	Knock knees	1	Osteotomy of right femur. Boots and leg instruments supplied	Improved
	Deformity of toe	1	Amputation	Satisfactory
	Congenital dislocation of left hip	1	Closed reduction and plaster	Condition satisfactory
	Deformity of chest and spine	1	Extension on frame. Exercises and massage	Back—much improved Chest—little change

The following is an analysis of the treatment of the 13 individual tuberculosis cases who left institutions during the year : —

INSTITUTION.	CASE REF.	LOCALISATION.	TREATMENT GIVEN.	CONDITION ON DISCHARGE.
Jenny Lind Hospital, Norwich	A.	Left hip	X-ray and observation	No evidence of tuberculosis
	B.	Spine	X-ray and observation	No evidence of tuberculosis
	C.	Right knee	Removal of plaster and X-ray	Disease quiescent
West Norfolk and Lynn Hospital, King's Lynn	D.	Forefinger of left hand	First admission—bone scraped. Second admission—finger amputated	No improvement Wound healed
	A.	Left hip	Put in plaster	No change. Transferred to Jenny Lind Hospital
War Memorial Hospital, Beccles	E.	Right knee	Extension and plaster spica followed by excision of joint	Disease arrested. Discharged in plaster
	F.	Left hip	Extension	Good result. All movements practically normal



The following is an analysis of the treatment of the 13 individual tuberculosis cases who left institutions during the year— (Continued) :—

INSTITUTION.	CASE REF.	LOCALISATION.	TREATMENT GIVEN.	CONDITION ON DISCHARGE.
Lord Mayor Treloar Cripples Hospital Alton, Hampshire	G.	Right hip	Extension, recumbency and immobilisation in plaster	Good result—disease arrested. Hip splint supplied
	H.	Left knee	Extension and later arthrodesis of knee joint. Knee straightened under anaesthesia to correct flexion deformity	Disease arrested. To wear leg instrument
St. Nicholas & St. Martin's Orthopædic Hospital, Pyrford, Surrey	I.	Left tibia	Rest and extension followed by caliper splint	Good result—disease quiescent. To wear splint for six months
	J.	Left hip	On hip frame three years followed by plaster spica. Later arthrodesis of hip	Disease quiescent. Walking well
	K.	Left shoulder	Fixation and general ultra violet light	Disease quiescent
	L.	Spine	Nil—showed signs of tuberculous meningitis	Removed by parents. Died nine days after
Gringley Children's Hospital, Gringley-on-the-Hill, Doncaster	M.	Left elbow	Immobilisation in plaster	Disease quiescent. Wearing plaster case

The period of institutional treatment of individual cases varies from a few days to over four years in the case of two patients who returned home in 1932. The combined length of stay of Maternity and Child Welfare and Tuberculosis patients amounts to 1020 weeks, the equivalent of 20 beds occupied throughout the year.

#### 4. Supply of Surgical Apparatus.

The following apparatus has been ordered during the year :—

	M. & C.W.	T.B.
Surgical boots ... ..	13	2
Surgical boots and instruments ... ..	10	—
Calipers ... ..	3	2
Spinal supports ... ..	—	2
Hip splints ... ..	—	2
Shoulder splints ... ..	1	—
Club foot shoes ... ..	2	—
Crutches ... ..	—	2
Toe spring ... ..	1	—
Straps for spinal supports ... ..	—	4
Repairs and alterations to apparatus ...	22	9
	<hr/> 52	<hr/> 23

Of the cases on the register at the end of the year, surgical apparatus was being worn by the following :—

	M. & C.W.	T.B.
Surgical boots ... ..	8	4
Ordinary boots wedged or otherwise altered ... ..	11	—
Surgical boots and leg instruments ...	14	5
Spinal support ... ..	—	3
Hip splints ... ..	—	3
Crutches ... ..	—	1
Collars ... ..	—	1
Shoulder splint ... ..	1	—
	<hr/> 34	<hr/> 17

#### 5. Services of Orthopædic Nurse.

1852 visits were made by the Nurse, 1008 to Education cases, 685 to Maternity and Child Welfare and 159 to Tuberculosis patients. The increasing number of children on the current register and the importance of a larger number of cases being visited more often in order to ensure successful and efficient treatment will soon make the appointment of a second Nurse a necessity.

#### 6. Cases discontinued.

68 cases have been removed from the register for the reasons given :—

	M. & C.W.	T.B.
Cured ... ..	19	2
Further treatment not needed or not advised	26	—
Age limit reached ... ..	—	*5
Private treatment ... ..	3	—
Removed from County ... ..	3	2
Treatment refused ... ..	5	—
Died ... ..	1	2
	<hr/> 57	<hr/> 11

\*These cases will be kept under observation by the Tuberculosis Officers.



In addition to the above, 31 children reaching school age, and 4 diagnosed as non-tuberculous were transferred to the Education Register.

## 7. Cases on the Register.

At the end of the year there were 641 current cases on the Register as compared with 605 at the end of 1931, 577 at the end of 1930 and 509 at the end of 1929. The former figure is made up of the following :—

	Education.	M.C.W.	T.B.	Totals.
Flat feet and valgus ankles ...	98	6	—	104
Claw feet ... ..	15	—	—	15
Hammer toes ... ..	5	—	—	5
Hallux valgus ... ..	1	—	—	1
Deformed toes ... ..	2	—	—	2
Knock knees ... ..	31	—	—	31
Bow legs ... ..	7	—	—	7
Congenital deformities :—				
Hip ... ..	18	2	—	20
Spine ... ..	4	1	—	5
Feet ... ..	39	23	—	62
Neck ... ..	20	—	—	20
Hand ... ..	4	—	—	4
Other ... ..	3	3	—	6
Spastic paralysis ... ..	33	3	—	36
Infantile paralysis ... ..	64	4	—	68
Muscular dystrophy ... ..	5	—	—	5
Erb's paralysis ... ..	2	4	—	6
Ischæmic palsy ... ..	1	—	—	1
Spina bifida ... ..	4	—	—	4
Spinal deformities (not congenital) ... ..	18	—	16	34
Hip diseases (not congenital) ... ..	6	—	19	25
Wry neck (not congenital) ... ..	11	4	—	15
Chest Deformities (not congenital) ... ..	3	—	—	3
Rickets ... ..	2	68	—	70
Round shoulders ... ..	6	—	—	6
Osteomyelitis ... ..	5	1	—	6
Amputations ... ..	8	—	—	8
Old injuries ... ..	10	—	—	10
Knee ... ..	—	—	12	12
Ankle ... ..	—	—	2	2
Finger ... ..	—	—	5	5
Elbow ... ..	—	—	3	3
Shoulder ... ..	—	—	2	2
Leg ... ..	—	—	1	1
Thigh ... ..	—	—	1	1
Sacro-iliac joint ... ..	—	—	1	1
Multiple ... ..	—	—	1	1
Rib ... ..	—	—	1	1
Miscellaneous ... ..	24	8	1	33
	<hr/> 449	<hr/> 127	<hr/> 65	<hr/> 641

331 of these cases have been examined at least once by the Orthopædic Surgeon, and 147 have received institutional treatment.

## BLIND PERSONS ACT, 1920.

There were 567 registered blind persons in the county on 31st December, 1932, compared with 536 in 1931 and 416 in 1928. This increase in numbers does not indicate an extension in the incidence of blindness, as most of the new cases were over 50 years of age when registered. The increase has been gradual over a five year period.

During the year 85 cases were reported for consideration, 70 of whom were certified to be blind within the meaning of the Act; the remaining 15 being entered on the Prevention Register. Certificates were issued as follows:—

			Blind within the meaning of the Act.	Not blind within the meaning of the Act.	Total.
Ophthalmic Specialists	...	...	29	11	40
Medical Practitioners	...	...	23	1	24
Assistant Medical Officers	...	...	11	3	14
Transfers	...	...	7	—	7
					85

The prevention register now contains 138 cases and the supplementary 63, compared with 124 and 64 respectively a year ago. As a result of treatment 4 persons were transferred from the “blind” to the “supplementary” register, whilst 3 cases were, after examination, removed from the “prevention” to the “blind” register.

### Training.

Registered cases over 16 years of age, approved for a course of training, continue to be sent to the Norwich Institution for the Blind, the Education Committee accepting financial responsibility. During the year, 3 such cases were approved and are reported to be making progress in mat-making, machine and hand knitting. There are at present 7 cases undergoing training, 5 at the Norwich Institution for the Blind and 2 at Leatherhead Blind Institution. During the year, 2 trainees (one male and one female) at the Norwich Institution were approved as workshop employees. One trainee refused to continue the course and returned home, whilst another was unfit to continue training, and was transferred to the Home Department of the Institution.

Fourteen children are being educated at the East Anglian School for the Blind, Gorleston, under the Education Committee's Scheme. On reaching the age of 16 years, if found suitable and willing, they are transferred to the Norwich Institution for a period of continued training which usually lasts about 4 years.

### Home Workers.

There are still 12 registered Home Workers in the County. Owing to the general depression they have found it difficult to dispose of the goods in their own locality, but the Norwich Institution for the Blind has taken practically all the surplus. In two cases applications were received for tea agencies to be taken into consideration for the purpose of calculating their augmentation, and these were granted. One of the piano tuners holds a contract under the Norfolk Education Committee for the tuning of school pianos in his area.



One female who is a member of the post guides was enabled through the kindness of the Norwich Institution Authorities, who paid her travelling expenses, to join the camp held in Hampshire.

**Home Teaching and Visiting.**

Both Home Teachers hold the certificate of the College of Teachers of the Blind.

4,415 visits were made during the year, in comparison with 4,774 last year.

30 cases received instruction in Braille or Moon reading and various pastime occupations.

**Welfare.**

Two blind women who were unable to walk have been loaned invalid chairs; there are now 5 such chairs in use.

Two cases were supplied with dentures.

There are 37 members of the National Library using Braille and Moon books.

Two Braille periodicals "Progress" and "Punch" are circulated monthly, whilst several Braille readers avail themselves of the embossed weekly edition of the Radio Times. The Moon newspaper is also circulated weekly.

The Committee of the Norwich Institution for the Blind allotted £10 to be distributed in Christmas gifts, and 60 of the poorer cases in the County benefited by this much appreciated donation.

**Employable Blind.**

The number of registered blind persons employed remains the same as in 1931 viz:—60, 13 as workshop employees at Institutions, 12 as Home Workers, and 35 in various occupations not supervised by the Local Authority.

**Wireless.**

There are now 153 registered blind persons using wireless sets supplied by the "Wireless for the Blind" Fund.

**Maintenance Allowances.**

185 registered blind persons are in receipt of maintenance allowances. The scale adopted is designed to provide during the winter months a single person living with relatives with an income of 16/- per week; a single person living alone with 19/-, and a married couple living together with 26/-. These rates are reduced by 2/- a week from 1st April to 30th September.

TABLE I.  
Distribution in Age Groups.

			0-5	5-16.	16-21.	21-30.	30-40.	40-50.	50-60.	60-70.	70-.	Un-known.	Total.
Male	...	...	—	12	4	16	17	30	46	65	94	6	290
Female	...	...	2	9	2	12	18	18	34	73	106	3	277
Totals	...	...	2	21	6	28	35	48	80	138	200	9	567

TABLE II.

## Ages at which Blindness occurred.

			0-1.	1-5.	5-10.	10-20.	20-30.	30-40.	40-50.	50-60.	60-70.	70-.	Un- known.
Male	...	...	41	3	7	16	16	29	30	37	51	19	42
Female	...	...	29	3	8	14	15	14	16	44	43	37	53
Totals	...	...	70	6	15	30	31	43	46	81	94	56	95

TABLE III (a)

## Training and Employment.

			Employed.				Under- going Training.						
			By Blind Institutions		(c) All others not included in (a) and (b).	(d) Total Employed.	(e) Industrial.	(f) Secondary.	(g) Professional or University.	(h) Trained but Unemployable.	(i) No Training but Trainable.	(j) Unemployable.	(k) Total.
			(a) Workshops.	(b) Home Workers.									
Male	...	...	8	9	35	54	4	—	—	—	1	167	278
Female	...	...	5	3	—	6	3	—	—	—	—	249	266
Totals	...	...	13	12	35	60	7	—	—	—	1	416	544

TABLE III (b)

## Occupations of Employed.

	Agents, Collectors, etc.	Basket Workers.	Boot Repairers.	Wire drawn Brushes.	Carpenters and Woodworkers.	Dealers (Tea Agents, Shopkeepers, etc.).	Domestic Servants.	Farmers.	Hand Knitters.	Machine Knitters.	Labourers.	Newsvendors	Poultry Farmers.	Tuners.	Miscellaneous.	Total.
Within Institutions for the Blind	—	7	1	—	—	—	—	—	—	5	—	—	—	—	—	13
In approved Home Workers Schemes	—	5	1	1	—	—	—	—	3	—	—	—	—	2	—	12
Others (not pas- time workers)	1	1	7	—	2	3	2	1	2	—	5	2	5	1	3	35
Totals	1	13	9	1	2	3	2	1	5	5	5	2	5	3	3	60



TABLE IV.

## Physically and Mentally Defective (all ages).

		(a) Mentally Defective.	(b) Physically Defective.	(c) Deaf.	(d) Combination of (a) and (b).	(e) Combination of (a) and (c).	(f) Combination of (b) and (c).	(g) Combination of (a), (b) and (c).	Total.
Male ...	...	6	42	12	1	1	6	—	68
Female ...	...	8	83	11	—	—	3	2	107
Totals ...	...	14	125	23	1	1	9	2	175

**Pre-School Age.**

All notified cases of Ophthalmia Neonatorum were followed up under the Maternity and Child Welfare Scheme (For result see Page 14).

**School Children.**

Treatment of school children continues to be carried out under the Education Committee's Scheme, and in cases where this is not applicable they are dealt with under the Public Health Act, 1925.

**General.**

A Conference of the Eastern Counties' Association for the Blind, which included an Exhibition of Handicrafts, to which most of the registered Home Workers and pastime workers contributed was held at the Norwich Institution for the Blind in June. The exhibits included knitted rugs, piece hearth rugs, children's knitted suits, scarves, and jackets, bed stockings and shawls, straw baskets, chicken coops, and a model yacht.

Towards the end of the year Miss Bramhall, representative of the Ministry of Health, made a survey of the County in respect of the administration of the Blind Persons Act.

# TUBERCULOSIS.

## 1. Notification.

The following tables show the number of new cases coming to the knowledge of the County Medical Officer by formal notification or otherwise during the past ten years divided into certain age groups:—

### (a) Pulmonary.

Year	Sex	Ages											Total	Total Males and Females
		0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and over		
1923	M.	—	4	8	9	15	22	39	16	10	10	2	135	} 273
	F.	—	2	7	11	18	15	32	24	12	10	7	138	
1924	M.	—	1	13	9	19	20	37	21	15	4	3	142	} 306
	F.	1	2	11	10	23	31	38	21	11	12	4	164	
1925	M.	1	4	10	7	13	26	50	27	20	12	6	176	} 324
	F.	—	2	8	12	25	23	32	14	17	10	5	148	
1926	M.	—	1	10	14	18	26	29	17	24	9	4	152	} 340
	F.	1	3	11	23	25	31	51	18	15	7	3	188	
1927	M.	—	9	22	17	17	22	38	28	19	16	3	191	} 362
	F.	2	6	10	17	24	33	38	21	13	5	2	171	
1928	M.	—	2	24	9	11	22	27	20	20	8	3	146	} 303
	F.	—	1	18	13	12	29	34	27	7	8	8	157	
1929	M.	—	1	19	9	11	21	33	24	16	10	5	149	} 331
	F.	—	1	23	6	17	24	43	33	18	10	7	182	
1930	M.	—	2	20	11	16	24	35	26	19	9	6	168	} 327
	F.	—	2	11	12	18	29	37	24	12	7	7	159	
1931	M.	—	2	22	9	17	20	26	18	23	12	6	155	} 299
	F.	—	—	14	4	18	24	34	25	10	13	2	144	
1932	M.	—	1	25	10	19	19	39	25	23	17	8	186	} 346
	F.	—	2	16	13	16	24	49	21	13	6	—	160	
Total ...	M.	1	27	173	104	156	222	353	222	189	107	46	1600	} 3211
	F.	4	21	129	121	196	263	388	228	128	88	45	1611	
Av. per year for 10 years	M.	.01	2.7	17.3	10.4	15.6	22.2	35.3	22.2	18.9	10.7	4.6	160.0	} 321
	F.	.4	2.1	12.9	12.1	19.6	26.3	38.8	22.8	12.8	8.8	4.5	161.1	

In England and Wales there has been a marked decrease in the number of pulmonary cases notified. From 60,747 notified in 1924, the numbers fell to 51,836 in 1932.

Last year I was able to record that the number of pulmonary cases notified in the county had been falling since 1927, but unfortunately this year there has been an increase of 47 cases compared with 1931. The total of non-pulmonary cases in 1932 was exactly the same as in the previous year.



## (b) Non-Pulmonary.

Year	Sex	Ages											Total	Total Males and Female
		0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and over		
1923	M.	3	6	13	8	5	2	4	1	—	—	—	42	} 84
	F.	3	9	12	3	5	4	4	—	1	—	1	42	
1924	M.	—	9	10	5	7	3	6	4	—	2	—	46	} 100
	F.	—	11	8	4	12	9	7	3	—	—	—	54	
1925	M.	2	15	16	15	5	3	3	1	2	—	—	62	} 120
	F.	—	8	8	10	9	5	8	8	1	—	1	58	
1926	M.	2	14	23	12	6	7	5	1	—	—	—	70	} 147
	F.	1	12	18	19	6	7	8	1	3	1	1	77	
1927	M.	—	27	40	10	6	2	10	1	3	2	1	102	} 179
	F.	—	11	22	10	8	6	7	5	8	—	—	77	
1928	M.	2	17	24	12	4	4	5	1	2	1	3	75	} 127
	F.	—	5	18	6	4	4	9	2	3	—	1	52	
1929	M.	2	14	28	20	9	5	4	8	2	1	4	97	} 172
	F.	—	12	19	10	9	11	9	1	1	2	1	75	
1930	M.	2	14	34	8	10	2	8	1	2	1	1	83	} 164
	F.	2	11	24	7	9	14	7	—	2	4	1	81	
1931	M.	2	24	31	18	13	5	12	3	4	2	1	115	} 222
	F.	2	17	26	12	14	7	16	7	2	2	2	107	
1932	M.	2	24	40	15	7	8	9	5	4	1	—	115	} 222
	F.	1	18	24	16	14	7	12	6	6	—	3	107	
Total ...	M.	17	164	259	123	72	41	66	26	19	10	10	807	} 1537
	F.	9	114	179	97	90	74	87	33	27	9	11	730	
Rate per 1,000 population per year for years	M.	1.7	16.4	25.9	12.3	7.2	4.1	6.6	2.6	1.9	1.0	1.0	80.7	} 153.7
	F.	.9	11.4	17.9	9.7	9.0	7.4	8.7	3.3	2.7	.9	1.1	73.0	

In England and Wales the number of non-pulmonary cases notified has decreased from 20,411 in 1924, to 17,956 in 1932.

Notification in Norfolk has been efficiently carried out, only one posthumous notification being received in 1932.

## 2. Mortality.

The death rate per 1,000 population in 1932 was .52 for pulmonary and .18 for non-pulmonary compared with .55 and .15 respectively in 1931. The rates for England and Wales in 1931 were pulmonary .74, non-pulmonary .15.

The following table shows the number of deaths, differentiated into certain age periods, during the past ten years. It is interesting to note since 1926 how the highest number of deaths has fluctuated between the sexes.

Deaths from Tuberculosis.

Year.	Sex.	Pulmonary.										Non-pulmonary.						
		Ages.										Ages.						
		0 to 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and Over	Total.	0 to 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and Over	Total.	
1923	M.	—	1	3	19	49	34	1	107	3	2	7	5	4	2	—	23	
	F.	1	—	8	21	41	23	6	100	2	9	5	6	4	2	2	30	
1924	M.	1	1	3	24	48	31	5	113	2	12	8	5	3	3	—	33	
	F.	—	—	6	23	40	23	9	101	—	4	2	7	7	1	4	25	
1925	M.	—	2	—	20	51	31	12	116	3	5	2	3	7	3	1	24	
	F.	—	—	4	27	41	21	3	96	—	2	4	3	3	3	—	15	
1926	M.	—	—	1	19	45	18	3	86	3	8	4	3	3	3	1	25	
	F.	—	—	5	31	40	20	8	104	5	4	5	4	2	4	3	27	
1927	M.	1	2	1	15	51	29	2	101	—	8	1	1	10	4	3	27	
	F.	—	—	3	20	43	17	5	88	5	2	7	5	4	5	2	30	
1928	M.	—	—	—	23	33	27	6	89	4	7	10	5	3	2	4	35	
	F.	1	—	5	17	44	14	6	87	3	3	—	5	7	5	2	25	
1929	M.	—	1	3	13	45	36	7	105	2	7	3	5	2	3	1	23	
	F.	—	—	1	28	39	14	10	92	2	2	6	5	2	7	1	25	
1930	M.	—	—	2	13	45	15	2	77	4	7	3	2	7	2	1	26	
	F.	—	—	2	31	40	26	8	107	—	8	6	2	1	7	—	24	
1931	M.	—	1	—	10	35	22	10	78	3	6	1	5	2	1	1	19	
	F.	1	—	1	23	33	19	7	84	3	8	4	4	4	4	2	29	
1932	M.	—	—	3	11	37	28	11	90	3	4	6	5	3	5	2	28	
	F.	—	1	1	14	44	14	4	78	5	9	1	5	7	1	3	31	
Total	M.	2	8	16	167	439	271	59	962	27	66	45	39	44	28	14	263	
	F.	3	1	36	235	405	191	66	937	25	51	40	46	41	39	19	261	
Average per year for 10 years	M.	.2	.8	1.6	16.7	43.9	27.1	5.9	96.2	2.7	6.6	4.5	3.9	4.4	2.8	1.4	26.3	
	F.	.3	.1	3.6	23.5	40.5	19.1	6.6	93.7	2.5	5.1	4.0	4.6	4.1	3.9	1.9	26.1	

The number of deaths from tuberculosis in England and Wales has been steadily decreasing, there being 5063 less deaths from pulmonary and 2382 from non-pulmonary tuberculosis in 1932 than in 1924.



### 3. Dispensary Cases.

Table I., on pages 44 and 45, gives details of the work done at or in connection with the two Dispensaries at Norwich and King's Lynn during the year.

It will be seen that of the 882 new cases examined, only 418 were found to be definitely tuberculous. The corresponding figures for 1931 were 828 and 376 respectively. These results indicate that medical practitioners generally throughout the County, continue to make good use of the Tuberculosis Officers' expert services in cases of possible tuberculous infection. The cordial relationship which exists between the medical practitioners and the Tuberculosis Officers is largely responsible for this.

The number of patients on the Dispensary Register at the end of the year was 2,322, as compared with 2,266 at the beginning. Of these, 249 were "observation cases" only, in which no definite diagnosis had been made. Table 2, on page 46, gives a detailed analysis of the total figures.

It will be seen that of the 2,073 definite cases, 817 had active disease, whilst of the 1,256 non-active cases 424 had reached the "arrested" stage, *i.e.*, the disease had been quiescent for at least two years. Cases in which tubercle bacilli had been found in the patient's sputum, classified as TB+1 (early disease), TB+2 (advanced disease) and TB+3 (very advanced disease), numbered 429. Of these, 72 were in Institutions, including those under the supervision of the Tuberculosis Officers in Public Assistance Institutions.

Of the remaining 357 there were at least 30 patients with advanced disease, who, owing to unsuitable home conditions and the risk of their infecting other members of the household, ought to have been receiving treatment in an Institution for advanced cases, had such been available. In the absence of suitable accommodation for such cases it is useless attempting to obtain a Magistrate's Order for their compulsory removal under Section 62 of the Public Health Act, 1925. The provision of a shelter at home only minimises the risk run by the rest of the family. In some cases, shelter treatment is not possible owing to the absence of a suitable site or the patient being too ill to sleep outside. Such cases are usually offered accommodation at one of the Public Assistance Institutions at the expense of the Tuberculosis Sub-Committee.

From Table 3 it will be seen that during the five years 1926 to 1930, 1539 new pulmonary cases were recorded on the tuberculosis register. 803 of these cases were classified as TB-, as tubercle bacilli were not demonstrated in sputum. The remaining 736 cases were classified as TB+ owing to the presence of tubercle bacilli in each case. These latter cases were further sub-divided into Group I.—limited disease—136 cases; Group II.—advanced disease—284 cases; and Group III.—very advanced disease—273 cases.

The condition at the end of 1932 of the 316 cases registered in 1926, *i.e.*, after seven years' treatment and supervision, was :—

		Tb. minus.	Tb. plus.		
			Gp. I.	Gp. II.	Gp. III.
Disease arrested or discharged as recovered	...	72	7	4	3
Disease not arrested	...	22	3	6	1
Condition not ascertained during year	...	2	1	—	—
Lost sight of, or otherwise removed from register	...	29	5	10	5
Dead	...	30	16	39	61
Totals	...	155	32	59	70

Thus in the TB - Group in the seven years 1 patient out of 5 died; in Group TB + I. the rate was 1 in 2; Group II., 2 in 3; whilst in Group III. the mortality was nearly 1 in 1. These facts need no further emphasis.

#### 4. Residential Treatment.

Beds for pulmonary cases are retained at Kelling Sanatorium for males, Bramblewood Sanatorium, Holt, and Ipswich Sanatorium for women, and at Holt Children's Sanatorium for children of both sexes. Patients are also sent to the County Sanatorium, Wyton, and Papworth Village Settlement. Cases of surgical tuberculosis are treated at the Norfolk and Norwich Hospital, Jenny Lind Hospital, King's Lynn Hospital, Beccles Hospital, Manfield Orthopædic Hospital, Northampton, St. Michael's Orthopædic Hospital, Clacton, Royal Sea Bathing Hospital, Clacton, St. Martin's Orthopædic Hospital, Pyrford, and Lord Mayor Treloar's Cripples Hospital, Alton.

TABLE 4.

(A) AVERAGE NUMBER OF BEDS AVAILABLE FOR PATIENTS DURING THE YEAR 1932.

		Pulmonary Tuberculosis.			Non-Pulmonary Tuberculosis.		Total.
		Observation.	"Sanatorium" Beds.	"Hospital" Beds.	Disease of Bones and Joints.	Other Conditions.	
Adult Males	...	1	65	1	13	2	82
Adult Females	...	1	30	1	3	1	36
Children (under 15)		3	37	—	17	11	68
Totals	...	5	132	2	33	14	186

#### *Stanninghall Colony.*

At the end of the Great War, the Norfolk Branch of the British Red Cross Society purchased a farm of 700 acres at Stanninghall for the purpose of establishing a farm colony and sanatorium. In 1920 a Joint Committee of representatives of the Norfolk County Council, and the Town Councils of Norwich and Great Yarmouth was established by an Order of the Minister of Health. This was revoked as from 1st April, 1930, when the Colony was transferred to the County Council. The Colony has accommodation for 48 patients, 16 beds being allotted to Norwich and 6 to Great Yarmouth. Industries (carpenter's shop, gardening, poultry keeping and basketwork) have been established. During the year the County Council decided that so far as the Norfolk beds were concerned, patients who had become quiescent or who had received the maximum benefit should be discharged. Norfolk patients in sanatoria, when they become fit for 2½ hours occupational therapy, are transferred to Stanninghall as soon as there is a vacancy.



In 1932, 18 patients were admitted and 18 discharged. The condition of those discharged was :—

Improved	...	...	...	...	...	4
Much improved	...	...	...	...	...	1
Disease quiescent	...	...	...	...	...	2
Disease arrested	...	...	...	...	...	3
Unsuitable for further treatment at Colony	...					6
Disease still active	...	...	...	...	...	2*
Total						18

\*These two cases were both discharged at patients' own request.

Table 4A, on page 42, shows that the average number of beds at sanatoria and hospitals occupied during the year was 186 compared with 185 the preceding year. The waiting list was usually a small one, and very little difficulty was experienced in obtaining beds within three or four weeks at the outside, except for adult male orthopaedic cases, where the nearest available accommodation is at Northampton and vacancies are very infrequent.

The actual number of patients treated during the year in each category is shown in Table 4B, on page 52. The total of 528 represents an increase of 34 as compared with the previous year.

Table 4C on page 52, shows that 48 patients were under the supervision of the Tuberculosis Officers in Public Assistance Institutions during the year.

Table 5, on page 53, gives in detail the results of residential treatment in the various classes of cases discharged from sanatoria and hospitals during the year. The figures for pulmonary cases bear out the experience of previous years that the best results are obtained when sanatorium treatment is given before the patient's sputum becomes positive. In spite of the various causes that operate to prevent early and adequate treatment it is satisfactory to note that 68% of the adult patients discharged from sanatoria during the past year had been persuaded to stay more than three months, whilst of the TB - cases 53.4% and TB + (1) cases 37% stayed long enough to reach the quiescent stage.

Reports have again been obtained with regard to as many as can be traced of the institutional cases discharged with the disease quiescent during the first seven years' operation of the Council's Tuberculosis Scheme, namely, 1921-7. The results show that quiescence has been maintained in a large proportion of the cases, as follows :—

	No. of "quiescent" discharges.			Report received.		Disease still "quiescent".	
1921	...	20	...	17	...	13	(9 "recovered")
1922	...	56	...	39	...	26	(17 do. )
1923	...	76	...	58	...	51	(38 do. )
1924	...	91	...	72	...	60	(41 do. )
1925	...	71	...	57	...	47	(33 do. )
1926	...	109	...	94	...	93	(53 do. )
1927	...	97	...	82	...	76	(33 do. )

TABLE 1.

TUBERCULOSIS SCHEME of the Norfolk County Council.  
Return showing the Work of the Dispensaries during the year 1932.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTALS.				GRAND TOTALS.	
	Adults.		Children.		Adults.		Children.		Adults.		Children.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding Contacts) :—														
* (a) Definitely tuberculous	115	89	21	22	26	29	56	33	141	118	77	55	391	
(b) Doubtfully tuberculous	—	—	—	—	—	—	—	—	27	38	56	34	155	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	26	50	42	41	159	
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous	2	4	3	—	—	2	10	6	2	6	13	6	27	
(b) Doubtfully tuberculous	—	—	—	—	—	—	—	—	1	5	13	16	35	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	4	13	48	50	115	
C.—CASES written off the Dispensary Register as :—														
(a) Cured	34	43	4	2	14	5	8	8	48	48	12	10	118	
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	—	—	—	—	—	—	—	—	59	97	150	133	439	
D.—NUMBER OF PERSONS on Dispensary Register on December 31st :—														
(a) Definitely tuberculous	536	464	149	126	165	158	281	194	701	622	430	320	2073	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	29	42	98	80	249	

\* Includes 11 cases previously removed from the Register as "Recovered."

\* Includes 11 cases previously removed from the Register as "Recovered."



TABLE 1—*continued*.

1.	Number of persons on Dispensary Register on January 1st	...	...	...	2,266
2.	Number of patients transferred from other areas and "lost sight of" cases returned	...	...	...	33
3.	Number of patients transferred to other areas and cases "lost sight of"	...	...	...	147
4.	Died during the year	...	...	...	155
5.	Number of attendances at the Dispensary (including Contacts)	...	...	...	1,272
6.	Number of patients' attendances for "Light" treatment at General Hospitals or at doctors' surgeries equipped with suitable installations	...	...	...	1,642
7.	Number of consultations with medical practitioners :—				
	(a) At Homes of Applicants	...	...	...	147
	(b) Otherwise	...	...	...	710
8.	Number of visits by Tuberculosis Officers to Homes	...	...	...	4,503
9.	Number of visits by Nurses to Homes for Dispensary purposes	...	...	...	1,635
10.	Number of visits by Voluntary Visitors to Homes	...	...	... (at least)	2,200
11.	Number of :—				
	(a) Specimens of Sputum, &c., examined in connection with Dispensary work	...	...	...	348
	(b) X-ray examinations made in connection with Dispensary work	...	...	...	138
12.	Number of Insured Persons under Domiciliary Treatment on the 31st December	...	...	...	212

TABLE 2. Analysis of Cases on Tuberculosis Dispensary Register, 31st December, 1932.

In Institutions (including Public Assistance Institutions).		ACTIVE.			QUIESCENT.			ARRESTED.			TOTALS.		
		M.	F.	Chn.	M.	F.	Chn.	M.	F.	Chn.	M.	F.	Chn.
Observation	...	—	—	—	—	—	—	—	—	—	—	2	2
T.B. — { 1	...	18	14	40	5	1	1	2	—	—	25	15	41
{ 2	...	10	6	—	4	—	—	—	—	—	14	6	—
T.B. + { 3	...	30	14	—	—	—	—	—	—	—	30	14	—
Bones and Joints	...	6	2	—	—	—	—	—	—	—	6	2	—
Abdominal	...	9	2	13	—	—	1	1	1	1	10	3	15
Glands	...	—	—	3	2	—	—	1	—	—	3	—	3
Genito-Urinary	...	—	—	8	—	—	—	—	—	—	—	—	8
Lupus	...	1	—	—	—	—	—	—	—	—	1	—	—
Abscesses	...	1	—	—	—	—	—	—	—	—	1	—	—
Totals		76	38	64	11	1	2	4	1	1	91	42	69
Home Treatment.													
Observation	...	—	—	—	—	—	—	—	—	—	29	40	176
T.B. — { 1	...	47	59	49	110	132	141	84	104	39	241	295	229
{ 2	...	12	20	—	31	13	1	20	6	—	63	39	1
T.B. + { 3	...	79	57	3	32	15	—	18	5	—	129	77	3
Bones and Joints	...	26	13	1	2	2	—	—	1	—	28	16	1
Abdominal	...	25	17	6	24	20	26	17	16	10	66	53	42
Glands	...	2	6	15	10	13	42	4	7	14	16	26	71
Genito-Urinary	...	5	16	144	22	24	139	15	8	41	42	48	324
Lupus (Skin)	...	7	5	—	5	1	—	1	2	—	13	8	—
Abscesses	...	5	15	1	2	3	1	—	—	3	7	18	5
Eye	...	1	—	2	1	—	5	2	—	—	4	—	7
...	...	1	—	—	—	1	—	—	1	—	1	2	—
Totals		210	208	221	239	224	355	161	150	107	639	622	859
Grand Totals		286	246	285	250	225	357	165	151	108	730	664	928



## 5. Dispensary and Other Treatment.

The Council's 163 shelters have again proved valuable accessories to treatment, particularly where patients' home conditions are bad. The difficulty is to induce the patients to sleep in the shelters during the winter months, when usually some 30 or 40 have to be brought into store on this account. It is one of the additional advantages of sanatorium treatment that patients who have undergone it are more inclined than others to occupy their shelters all the year round.

37 patients received courses of Ultra-Violet Light treatment during the year either at the Norfolk and Norwich Hospital or by arrangement with certain medical practitioners in the County who have installed the necessary apparatus. The results on the whole have been satisfactory, as shown by the following statement:—

Form of Tuberculosis.	No. of Cases.	Periods of Treatment.	Results.			
			Quies-cent.	Much Im-proved.	Im-proved.	No Improve-ment.
Glandular ... ..	10	{ 1—6 months	1	2	6	—
		{ 10 „	—	—	1	—
Bones and Joints ...	3	2—10 „	—	1	1	1
Abscesses ... ..	1	6 „	—	—	1	—
Lupus ... ..	17	{ 2—6 „	—	3	5	—
		{ 7—12 „	1	3	5	—
Observation only ...	6	1—4 „	—	3	3	—
Totals ...	37		2	12	22	1

Dental extractions were authorised in 18 cases, and dentures in 5 cases, whilst a weekly average of 180 patients received extra nourishment in the form of milk, maltoline, or cod liver oil.

Surgical appliances were provided as follows, in addition to the cases (under 16 years of age) included in the Orthopædic Scheme report:—

Surgical Boots	...	...	...	...	6
Hip Splints	...	...	...	...	3
Spinal Supports	...	...	...	...	8
Crutches	...	...	...	...	1
Walking Calipers	...	...	...	...	2
Plaster Beds	...	...	...	...	4

Total ... 24

## 6. The Public Health (Prevention of Tuberculosis Regulations, 1925.

One patient suffering from early pulmonary tuberculosis who had previously been employed in milk production, was referred to the District Medical Officer of Health for any necessary action, on his discharge from the Sanatorium with a positive sputum.

## 7. Public Health Act, 1925.

No action was taken under Section 62 during the year.

Table 3.

(a) PULMONARY TUBERCULOSIS.

Return showing in summary form (a) the condition at the end of 1932 of all new cases from 1926 onwards still remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register during that period. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of pulmonary tuberculosis, and their classification at that time.

Condition at the time of the last record made during the year to which the return relates.	1926					1927					1928					1929							
	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus			
	Total (Class T.B. plus)			Group 3		Total (Class T.B. plus)			Group 3		Total (Class T.B. plus)			Group 3		Total (Class T.B. plus)			Group 3				
	Group 1	Group 2	Group 3			Group 1	Group 2	Group 3			Group 1	Group 2	Group 3			Group 1	Group 2	Group 3					
Remaining in Dispensary Register on 31st December, 1932.	Disease Arrested	M.	8	2	2	1	5	10	2	2	—	4	12	4	1	—	5	6	2	3	—	5	
		F.	18	1	1	4	16	—	—	—	—	—	14	3	—	—	3	5	1	2	—	3	
		Children	13	—	—	—	17	—	—	—	—	—	17	—	—	—	—	4	—	—	—	—	
		M.	4	1	5	7	15	3	9	3	15	8	8	2	18	9	5	13	3	21			
	Disease not Arrested	M.	10	2	1	3	17	—	4	—	—	4	27	2	6	3	11	27	4	9	4	17	
		F.	8	—	—	—	22	—	—	—	—	—	38	—	2	—	2	38	—	—	—	—	
	Condition not ascertained during the year	M.	2	1	—	1	7	—	—	—	—	—	14	—	1	—	1	3	—	—	—	—	
		F.	63	7	9	4	20	104	5	15	3	23	139	17	18	5	40	87	12	27	7	46	
	(a) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered	M.	4	3	1	—	4	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			F.	18	1	—	1	8	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—
Children			11	—	—	—	13	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
M.			29	5	10	5	20	39	5	7	4	16	29	2	8	5	15	16	4	7	3	14	
Lost sight of, or otherwise removed from Dispensary Register		F.	10	10	21	31	62	8	5	21	24	50	10	4	15	22	41	8	6	17	15	33	
		M.	17	5	18	29	52	9	3	19	28	50	6	4	28	18	50	10	5	19	24	48	
Dead		F.	3	1	—	1	2	—	1	—	—	1	1	—	—	1	1	1	1	—	1	1	2
		Children	92	25	50	66	141	81	14	48	56	118	46	10	51	46	107	35	15	44	43	102	
Total written off Dispensary Register			155	32	59	70	161	185	19	63	59	141	185	27	69	51	147	122	27	71	50	148	
GRAND TOTALS			...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...



(a) Remaining on Dispensary Register on 31st December, 1932.

(b) Not now on Dispensary Register, and reasons for removal therefrom.

Disease Arrested	Adults		1930																	1931																	1932																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
	M.	F.	5	1	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

...

(b) NON-PULMONARY TUBERCULOSIS.

Return showing in summary form (a) the condition at the end of 1932 of all new cases from 1926 onwards still remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register during that period.

Condition at the time of the last record made during the year to which the return relates.		1926					1927					1928					1929					
		Bones and Joints		Abdominal	Other Organs	Periheral Glands	Total	Bones and Joints		Abdominal	Other Organs	Periheral Glands	Total	Bones and Joints		Abdominal	Other Organs	Periheral Glands	Total			
		M.	F.	Children	Adults	M.	F.	Children	Adults	M.	F.	Children	Adults	M.	F.	Children	Adults	M.	F.	Children		
Disease Arrested		2		2	—	1	5	2	—	—	—	2	3	1	—	—	4	3	2	1	6	
		2		—	—	2	5	2	1	—	—	—	—	—	—	—	—	1	2	1	4	
		5		3	1	9	18	1	3	7	1	12	20	4	3	—	—	8	—	8	11	
		3		—	2	5	2	—	2	—	—	—	6	5	—	3	—	—	—	—	9	
		4		—	—	4	2	1	—	—	—	—	2	2	1	—	—	3	3	1	12	
Disease not Arrested		5		5	—	21	31	8	8	1	26	43	4	4	1	—	9	8	—	25	42	
		—		—	—	1	1	2	—	—	2	4	—	—	—	—	1	1	—	3	5	
		21		10	3	32	66	18	12	4	37	71	18	10	3	43	74	28	16	6	39	
Total on Dispensary Register at 31st December, 1932.		—	—	—	—	—	—	1	—	2	—	3	—	—	—	—	—	—	—	2	2	
Transferred to Pulmonary		3		—	—	1	4	1	—	—	1	2	2	2	1	—	—	—	—	1	1	
		2		—	2	4	4	1	—	—	—	1	—	—	—	—	—	—	—	—	1	
		4		7	2	18	31	2	1	—	10	13	2	—	—	—	—	—	—	—	3	
		4		1	1	6	12	13	1	2	7	23	6	6	4	8	24	11	2	1	7	21
		2		—	1	—	3	2	2	2	—	6	3	—	—	—	3	5	—	2	—	7
Lost sight of, or otherwise removed from Dispensary Register		1		—	1	—	2	3	2	—	—	5	1	1	—	—	1	—	—	1	2	
		—		2	—	—	2	—	3	3	1	4	—	2	1	2	5	4	1	—	6	
		16		10	5	27	58	22	9	4	19	54	12	11	6	24	53	21	3	5	12	41
Total written off Dispensary Register		37	20	8	59	124	40	21	8	56	125	30	21	9	67	127	49	19	11	51	130	
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary)		37	20	8	59	124	40	21	8	56	125	30	21	9	67	127	49	19	11	51	130	



				1930						1931						1932					
(a) Remaining on Dispensary Register on 31st December, 1932.	Disease Arrested	Adults	M.	1	—	1	1	3	1	—	—	—	1	—	—	—	—	—	—		
		F.	3	—	3	2	8	2	2	—	—	—	2	—	—	—	—	—			
		Children	1	2	—	3	6	1	—	—	—	4	5	—	—	—	—	—			
	Disease not Arrested	Adults	M.	6	1	1	4	12	8	4	3	6	21	6	1	9	9	25			
		F.	2	4	1	6	13	8	8	3	6	6	23	7	3	6	13	29			
		Children	6	9	3	42	60	8	8	7	1	72	88	10	19	3	80	112			
	Condition not ascertained during the year			1	2	2	2	7	—	1	—	1	2	—	—	—	—	—			
	Total on Dispensary Register at 31st December, 1932.			20	18	11	60	109	28	15	10	89	142	23	23	18	102	166			
	Transferred to Pulmonary ...			—	—	1	—	1	—	—	—	1	1	—	—	—	—	—			
	(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered	Adults	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
F.			—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Children			—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Lost sight of, or otherwise removed from Dispensary Register		Adults	M.	5	2	1	5	13	4	—	1	2	7	—	—	1	—	1			
		F.	2	1	2	—	5	—	—	—	1	—	1	2	—	—	—	2			
		Children	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Dead		Adults	M.	—	—	1	—	1	—	1	1	—	2	2	1	1	—	4			
		F.	1	—	1	—	2	—	1	1	—	1	3	—	—	1	4	5			
		Children	8	3	5	5	21	5	5	2	3	3	13	4	1	2	5	12			
Total written off Dispensary Register			8	3	5	5	21	5	2	3	3	13	4	1	2	5	12				
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary) ...				28	21	16	65	130	33	17	13	92	155	27	24	20	107	178			

TABLE 4.

RESIDENTIAL INSTITUTIONS.

(B) RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT  
DURING THE YEAR 1932.

				In Insti- tutions on Jan 1.	Admitted during the year.	Discharged during the year.	Died in the Insti- tutions.	In Insti- tutions on Dec. 31.
Number of Patients	Adults	M.		76	136	119	10	83
		F.		32	91	79	10	34
	Child- ren (under 15)			70	89	93	3	63
Number of Obser- vation Cases	Adults	M.		—	13	12	1	—
		F.		—	7	6	—	1
	Child- ren (under 15)			4	10	12	—	2
Totals ...				182	346	321	24	183

(C) RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT  
IN PUBLIC ASSISTANCE INSTITUTIONS DURING THE YEAR 1932.

				In Insti- tutions on Jan 1.	Admitted during the year.	Discharged during the year.	Died in the Insti- tutions.	In Insti- tutions on Dec. 31.
Pulmonary cases	Adults	M.		1	21	8	7	7
		F.		7	6	5	4	4
	Child- ren (under 15)			1	3	—	1	3
Totals				9	30	13	12	14
Non-Pulmonary cases	Adults	M.		1	4	1	2	2
		F.		1	1	—	1	1
	Child- ren (under 15)			—	2	—	1	1
Totals				2	7	1	4	4
Grand Totals				11	37	14	16	18



TABLE 5.

RESIDENTIAL INSTITUTIONS.

Return showing the immediate results of treatment of patients and of observation of doubtful cases discharged from Residential Institutions during the year 1932.

Classification on admission to the Institution.	Condition at time of discharge.	Duration of Residential Treatment in the Institution.												TOTAL.	
		Under 3 months.			3—6 months.			6—12 months.			More than 12 months.				
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.		
Class T.B. minus.	Quiescent ...	...	1	2	—	15	5	—	3	2	16	3	—	17	64
	Not quiescent ...	...	11	4	2	1	5	1	1	—	3	—	—	1	29
	Died in Institution	...	1	2	—	—	1	—	1	—	—	—	—	1	6
Class T.B. plus Group 1.	Quiescent ...	...	—	—	—	2	2	—	2	1	—	3	—	—	10
	Not quiescent ...	...	3	—	—	2	2	—	3	6	1	—	—	—	17
	Died in Institution	...	—	—	—	—	—	—	—	—	—	1	—	1	1
Class T.B. plus Group 2.	Quiescent ...	...	—	—	—	—	1	—	1	—	—	1	—	—	3
	Not quiescent ...	...	13	8	—	9	14	—	6	7	—	3	2	—	62
	Died in Institution	...	1	1	—	1	2	—	1	1	—	2	—	—	9
Class T.B. plus Group 3.	Quiescent ...	...	—	—	—	—	—	—	—	—	—	—	—	—	—
	Not quiescent ...	...	1	3	—	2	—	—	—	—	—	—	—	—	6
	Died in Institution	...	1	1	—	—	—	—	—	—	—	—	—	—	2

TABLE 5--Continued.

[illegible]

Observation or purpose of diagnosis.	Diagnosis on Discharge.	Under 4 weeks.			More than 4 weeks.			Total.
		M.	F.	Ch.	M.	F.	Ch.	
Tuberculous	...	2	—	2	4	4	6	18
Non-tuberculous	...	2	—	—	3	1	3	9
Doubtful	...	1	1	1	1	—	—	4



## SALE OF FOODS AND DRUGS ACTS.

The two Inspectors of Weights and Measures act as part-time sampling officers, examinations being undertaken by the County Analyst.

During the year 666 formal samples were submitted. Details of these, together with the action taken by the Council, are given in the following table :—

				Action taken.			
Article.				No. of Samples taken.	No. found Genuine.	No. Adulter- ated.	Prosecu- tion Ordered. Cautioned.
Milk	...	...	...	507	421	86	2 37
Butter	...	...	...	81	79	2	1 1
Whisky	...	...	...	12	11	1	1 —
Brandy	...	...	...	2	1	1	— 1
Rum	...	...	...	4	4	—	— —
Gin	...	...	...	2	2	—	— —
Ginger Wine	...	...	...	10	8	2	— 1
Ginger Brandy	...	...	...	1	1	—	— —
Raisin Wine	...	...	...	3	2	1	— 1
Blackcurrant flavoured Wine	...	...	...	1	1	—	— —
Orange Wine	...	...	...	4	3	1	1 —
Orange and Quinine Wine	...	...	...	3	3	—	— —
Quinine Wine	...	...	...	1	1	—	— —
Sherry flavoured Wine	...	...	...	1	1	—	— —
Rum Punch Cordial	...	...	...	1	1	—	— —
Grape Fruit Juice	...	...	...	1	1	—	— —
Grape Juice	...	...	...	1	1	—	— —
Ruby Wine (port style)	...	...	...	1	1	—	— —
Mincemeat	...	...	...	2	2	—	— —
Evaporated unsweetened Milk	...	...	...	1	1	—	— —
Cream	...	...	...	1	1	—	— —
Honey	...	...	...	1	1	—	— —
Lemon Curd	...	...	...	3	3	—	— —
Cocoa, Eggs, Malt and Milk	...	...	...	2	2	—	— —
Extract Cod Liver Oil and Malt	...	...	...	1	1	—	— —
Cod Liver Oil	...	...	...	1	1	—	— —
Dry Coffee Extract	...	...	...	1	1	—	— —
Calves Foot Jelly	...	...	...	1	1	—	— —
Pork Sausage	...	...	...	1	1	—	— —
Breakfast Sausage	...	...	...	1	1	—	— —
Meat Paste	...	...	...	1	1	—	— —
Shredded Suet	...	...	...	3	3	—	— —
Corned Beef	...	...	...	1	1	—	— —
Kidney Soup	...	...	...	1	1	—	— —
Malt Vinegar	...	...	...	2	2	—	— —
Old Wine Vinegar	...	...	...	1	1	—	— —
Baking Powder	...	...	...	1	1	—	— —
Ginger Pudding	...	...	...	1	1	—	— —

Article.		No of Samples taken.	No. found Genuine.	No. Adulter- ated.	Action taken.	
					Prosecu- tion Ordered.	Cautioned.
Cake	...	1	1	—	—	—
Sponge Sandwich	...	1	1	—	—	—
Camphorated Oil	...	1	1	—	—	—
		—	—	—	—	—
		666	572	94	5	41
		—	—	—	—	—

## VENEREAL DISEASES.

Under the Public Health (V.D.) Regulations of 1916, treatment centres have been established at the Norfolk and Norwich Hospital and the West Norfolk and Lynn Hospital. Sessions are held at Norwich twice weekly for both sexes, and at King's Lynn twice weekly for males and once weekly for females. Intermediate treatment is carried out daily at both Clinics.

Owing to increased attendances at the Lynn Clinic the Council arranged for the employment of a part-time male orderly to assist the Medical Officer and to give the necessary irrigations for male patients.

Further, as the existing accommodation had become inadequate, negotiations were entered into with the Governors and they have agreed to provide suitable accommodation for the Clinic in their hospital extension scheme.

179 new patients from the administrative county were diagnosed during the year 1932, as follows :—

Clinic.	Syphilis.		Gonorrhoea.		Not V.D.	...	Total.
Norwich	...	35	...	57	...	5	97
King's Lynn	...	31	...	30	...	21	82
		—		—		—	—
Total	...	66	...	87	...	26	179
		—		—		—	—

This is an increase of 13 cases compared with the number of new cases during 1931.

The following table shows the total attendances made by Norfolk patients at each clinic during the past five years :—

Year.		Norwich.		King's Lynn.
1932	...	2436	...	3638
1931	...	2326	...	1636
1930	...	2066	...	1086
1929	...	2229	...	909
1928	...	2325	...	394



It will be observed that while the attendances at Norwich remain more or less stationary those at King's Lynn show a considerable increase. This is not due to a rise in the incidence of the disease, but to greater advantage being taken of the improved facilities for treatment now provided.

Pathological examinations were made as follows during 1932 :—

For Wasserman Reaction	...	...	...	409
„ Spirochetes	...	...	...	26
„ Gonococci	...	...	...	372
„ Other organisms	..	...	...	19
				<hr/>
Total	...	...		826
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